10/11/2006 13:35

Image# 26940402131

### FEC FORM 3X

Only

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only NAME OF **USE FEC MAILING LABEL** Example:If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines **PlastyPAC** 444 E. Algonquin ADDRESS (number and street) Check if different than previously Arlington Heights IL 60005 reported. (ACC) FEC IDENTIFICATION NUMBER STATE. ZIPCODE 🛋 CITY A IS THIS NEW **AMENDED** C00249342 Х REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Χ Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: **Termination Report** (TER) in the Election on State of 07 0 1 2006 09 30 2006 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. William Seward Type or Print Name of Treasurer Electronically Filed by William Seward 10 11 2006 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 02/2003)

### Image# 26940402132

### **SUMMARY PAGE**

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name **PlastyPAC** <sup>®</sup> D <sup>®</sup> D 0.7 0 1 2006 0.9 3 0 2006 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 92291.86 2006 January 1 (b) Cash on Hand at 103611.86 Begining of Reporting Period ..... 86593.00 142913.00 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 190204.86 235204.86 6(a) and 6(c) for Column B) ..... 104500.00 149500.00 7. Total Disbursements (from Line 31) ...... Cash on Hand at Close of Reporting Period 85704.86 85704.86 (subtract Line 7 from Line 6(d)) ..... 9. Debts and Obligations owed the committee (Itemize all on Schedule C and/or Schedule D) ..... 0.00 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) .....

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

## DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003) Page 3

Write or Type Committee Name PlastyPAC

Report Covering the Period:

From:

м м 0 7

<sup>D</sup> 0 1

2006

o. 0 9

<sup>D</sup> 3<sup>D</sup> 0

2006

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From:  (a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	71733.00	120533.00
	(ii) Unitemized	14860.00	22380.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	86593.00	142913.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	86593.00	142913.00
2.	Transfers From Affiliated/Other Party Committees	0.00	0.00
13.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
16	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
0.	to Federal candidates and Other Political Committees	0.00	0.00
7.	Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
8.	Transfers from Non-Federal and Levin Funds		
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	86593.00	142913.00
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)	86593.00	142913.00

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Operating Expenditures: (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating		
	Expenditures	0.00	0.00
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	0.00	0.00
	Transfers to Affiliated/Other Party		
	Committees	0.00	0.00
	Contributions to Federal Candidates/Committees	104500.00	140500.00
	and Other Political Committees	104500.00	149500.00
	Independent Expenditure (use Schedule E)	0.00	0.00
	Coordinated Expenditures Made by Party		
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
	Loan Repayments Made	0.00	0.00
•	Loan repaymente Wado		
	Loans Made	0.00	0.00
	Refunds of Contributions To: (a) Individuals/Persons Other	0.00	0.00
	Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees	200	0.00
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds	0.00	0.00
	(add Lines 28(a), (b), and (c))	0.00	
	Other Disbursements	0.00	0.00
	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely	0.00	0.00
	With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	104500.00	149500.00
	Total Federal Disbursements		
	(subtract Line 21(a)(ii) from Line 30(a)(ii)		
	from Line 31)	104500.00	149500.00

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	86593.00	142913.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	86593.00	142913.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 6 / 73
ΙT	EMIZED RECEIPTS		or each category of the	(check only one)
•			Detailed Summary Page	X   11a   11b   11c   12   13   14   15   16   17
An or	ly information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any persoress of any political committee to	on for the purpose of soliciting contributions
$\overline{}$	NAME OF COMMITTEE (In Full)			
$\rangle$	PlastyPAC			
۹.	Full Name (Last, First, Middle Initial) Dr. Scott Aaronson			Date of Receipt
	Mailing Address 1221 North Indian Canyo	n Dr.		07 15 2006
	City	State	Zip Code	Transaction ID: SA11A1.4743
	Palm Springs	CA	92262	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Self	Occupation Physician		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		250.00	
	Other (specify) ▼	0 0		
3.	Full Name (Last, First, Middle Initial) Dr. Govind Acharya			Date of Receipt
	Mailing Address 5121 N. Central Ave.			M " M / D " D / Y " Y " Y " Y
	City	Stata	Zin Codo	08 25 2006
	City Phoenix	State AZ	Zip Code 85012	Transaction ID: SA11A1.5068  Amount of Each Receipt this Period
	FEC ID number of contributing		03012	
	federal political committee.	C		250.00
	Name of Employer Self	Occupation		
	Receipt For:	PHysician	1 Year-to-Date ▼	_
	Primary General	Aggregate		1
	Other (specify) ▼	0 0	250.00	
<b>)</b> .	Full Name (Last, First, Middle Initial) Dr. hilton Adler			Date of Receipt
	Mailing Address 179 Bellemeade Rd., Ste	. 1		09 03 7 9 9 9
	City	State	Zip Code	Transaction ID: SA11A1.5084
	East Setauket	NY	11733	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Self	Occupation Physician		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		300.00	
s	UBTOTAL of Receipts This Page (optional)			800.00
	1 3-(-1)			

PAGE 7 / 73 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) **PlastyPAC** Full Name (Last, First, Middle Initial) Date of Receipt A. Dr. Mirza Ahmad Mailing Address 4782 Munson St., NW 08 2006 25 City State Zip Code Transaction ID: SA11A1.5080 Canton OH 44718 Amount of Each Receipt this Period FEC ID number of contributing 300.00 C federal political committee. Name of Employer Self Occupation Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Edwin Austin Date of Receipt Mailing Address 960 Liberty St., SE, Ste. 170 02 2006 City State Zip Code Transaction ID: SA11A1.4564 Salem OR 97302 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Self Occupation Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. Dr. Rafael Avila Date of Receipt Mailing Address 1022 Griffin Parkway, Ste. 110 08 25 2006 Zip Code City State Transaction ID: SA11A1.5066 Misison TX 78572 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer Self Occupation Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1050.00 SUBTOTAL of Receipts This Page (optional) .....

S	SCHEDULE A (FEC Form 3X)		11	FOR LINE NUMBER: PAGE 8 / 73
	•		Use separate schedule(s) or each category of the	(check only one)
Ш	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar	y information copied from such Reports and Sta	atements may	not be sold or used by any person	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the r	name and add	lress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	PlastyPAC			
$\angle$				
٨	Full Name (Last, First, Middle Initial) Dr. A. Allen Badri			Data of Respire
Α.				Date of Receipt
	Mailing Address 1410 Burr Oak Court Suite 14a			07 14 2006
	City	State	Zip Code	Transaction ID: SA11A1.4729
	Hinsdale	IL	60521	Amount of Each Receipt this Period
	FEC ID number of contributing		1 1 1 1 1 1	
	federal political committee.	C		300.00
	Name of Employer Self	Occupation		
		Physician		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		300.00	
	Other (specify)		1 1 1 1 1 1 1	
	Full Name (Last, First, Middle Initial)			
В.	Dr. M.Hugh Bailey			Date of Receipt
	Mailing Address 351 Hospital Blvd., Ste.	617		M M / D D / Y Y Y Y
				08 04 2006
	City	State	Zip Code	Transaction ID: SA11A1.4943
	Newport Beach	CA	92663	Amount of Each Receipt this Period
	FEC ID number of contributing			500.00
	federal political committee.	C		300.00
	Name of Employer	Occupation	<u> </u>	-
	Self	Physician		
	Receipt For:		Year-to-Date ▼	
	Primary General	r iggi ogulo		1
	Other (specify) ▼		500.00	
				4
_	Full Name (Last, First, Middle Initial)			
C.	Dr. Bruce Baker			Date of Receipt
	Mailing Address PO Box 4044			08 03 2006
	City	State	Zip Code	Transaction ID: SA11A1.4934
	Temple	TX	76505	Amount of Each Receipt this Period
	•	17	70303	Afflount of Each Necept this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Self	Occupation		
		Physician		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	' '	800.00	1
	Other (specify) ▼		000.00	1
	l			
				1100.00
Ls	UBTOTAL of Receipts This Page (optional)		······	1100.00
1				

SCHEDULE A (FEC Form 3X)  ITEMIZED RECEIPTS  Use separate schedule(s) or each category of the Detailed Summary Page			FOR LINE NUMBER: PAGE 9/73 (check only one)  X 11a 11b 11c 12	
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) PlastyPAC			
Α.	Full Name (Last, First, Middle Initial) Dr. Matthew Bonanno Mailing Address 215 East 77th St.  City New York  FEC ID number of contributing federal political committee.  Name of Employer Self  Receipt For:	State NY  C  Occupation Physician Aggregate		Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Primary General Other (specify) ▼	0 0	300.00	
3.	Full Name (Last, First, Middle Initial) Dr. Mark Boshert Mailing Address 235 Southern Oaks Dr.  City	State	Zip Code	Date of Receipt    M M
	Saint Charles  FEC ID number of contributing federal political committee.	C	63303	Amount of Each Receipt this Period  500.00
	Name of Employer Self  Receipt For:  Primary General  Other (specify) ▼	Occupation Physician Aggregate		
<b>-</b> .	Full Name (Last, First, Middle Initial) Dr. Keith Brandt			Date of Receipt
	Mailing Address 660 S. Euclid Ave., Ste.  City St. Louis  FEC ID number of contributing federal political committee.  Name of Employer Self  Receipt For: Primary General	State MO  C  Occupation Physician		Transaction ID: SA11A1.4700  Amount of Each Receipt this Period  250.00
	Other (specify) ▼	0 0		1050.00
	UBTOTAL of Receipts This Page (optional)		<u> </u>	1050.00
T	OTAL This Period (last page this line number or	nly)		

SCHEDUI	LE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUM	
TEMIZED RECEIPTS			or each category of the Detailed Summary Page	ı <del>⊢</del> ⊢	11b
Any information or for commerce	n copied from such Reports and Stial purposes, other than using the	atements may	y not be sold or used by any perso dress of any political committee to	n for the purpose o	of soliciting contributions s from such committee.
NAME OF O	COMMITTEE (In Full)				
Full Name ( Dr. Keith Bra  Mailing Add		F401		Date of Rece	eipt
	- 000 3. Luciiu Ave., Sie			0 9	07 2006
City St. Louis		State MO	Zip Code 63110		ID: SA11A1.5114 ach Receipt this Period
FEC ID nun	nber of contributing cal committee.	C		- Amount of E	750.00
Name of En Self	nployer	Occupation Physician			
Receipt For Prima Other		Aggregate	e Year-to-Date ▼ 1000.00		
<b>B.</b> Dr. Stephen				Date of Rece	eipt
Mailing Add	Mailing Address 16633 Ventura Blvd., Ste. 110			07	11 2006
City		State	Zip Code		ID: SA11A1.4615
Encino		CA	91436	Amount of E	ach Receipt this Period
federal polit	nber of contributing cal committee.	C			1000.00
Name of En Self	nployer	Occupation Physician			
Receipt For	:		Year-to-Date ▼		
Prima Other	ry General (specify) ▼		1000.00		
Full Name (	Last, First, Middle Initial)			Date of Rece	pint
Mailing Add					0 9 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	1-	State	Zip Code		ID: SA11A1.4674
Sacramer		CA	95816	Amount of E	ach Receipt this Period
federal polit	nber of contributing cal committee.	C			500.00
Name of En Self	npioyer	Occupation Physician			
Receipt For Prima Other			e Year-to-Date ▼ 500.00		
SUBTOTAL of	f Receipts This Page (optional)				2250.00
TOTAL This	Period (last page this line number of	only)			

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 73 (check only one)    X
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) PlastyPAC			
۹.	Full Name (Last, First, Middle Initial) Dr. John Bruno Mailing Address 2685 Swamp Cabbage C	Court		Date of Receipt  0 7 0 8 2 0 0 6
	City	State	Zip Code	Transaction ID: SA11A1.4631
	Fort Myers	FL	33901	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer Self	Occupation Physician		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
3.	Full Name (Last, First, Middle Initial) Dr. A. Jay Burns	Date of Receipt		
	Mailing Address 411 N. Washignton Ave.			07 11 / Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.4639
	Dallas  FEC ID number of contributing federal political committee.	C	75246	Amount of Each Receipt this Period  300.00
	Name of Employer Self	Occupation Physician		
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 300.00	
<del></del>	Full Name (Last, First, Middle Initial) Dr. M. Bradley Calobrace			Date of Receipt
	Mailing Address 902 Dupont Rd., Ste. 200			07 15 7 2006
	City Louisville	State KY	Zip Code	Transaction ID: SA11A1.4715
	FEC ID number of contributing federal political committee.	C	40207	Amount of Each Receipt this Period  250.00
	Name of Employer Self	Occupation Physiciar	1	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	
S	UBTOTAL of Receipts This Page (optional)			1050.00
T	OTAL This Period (last page this line number on	ılv)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 12 / 73
	EMIZED RECEIPTS		or each category of the	(check only one)
			Detailed Summary Page	X   11a   11b   11c   12   15   16   17
An	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	y not be sold or used by any perso	
or		ame and add	dress of any political committee to	solicit contributions from such committee.
$\rangle$	NAME OF COMMITTEE (In Full) PlastyPAC			
۹.	Full Name (Last, First, Middle Initial) Dr. Frank Campanile			Date of Receipt
	Mailing Address 13691 Metro Parkway Soute 110		7:n Code	09 06 2006
	City Fort Myers	State FL	Zip Code 33912	Transaction ID: SA11A1.5099  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00012	250.00
	Name of Employer Self	Occupation Physician		
	Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 250.00	
3.	Full Name (Last, First, Middle Initial) Dr. Michael Chaney	0 0		Date of Receipt
	Mailing Address 17070 Red Oak Dr., Ste	. 400		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.4907
	Houston	TX	77090	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		300.00
	Name of Employer Self	Occupation Physician		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		300.00	
<b>-</b> .	Full Name (Last, First, Middle Initial) Dr. Diane Colgan			Date of Receipt
	Mailing Address 9800 Falls Rd., Ste. 105			07 06 7 2006
	City Potomac	State MD	Zip Code 20854	Transaction ID: SA11A1.4625  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20004	300.00
	Name of Employer Self	Occupation Physician		
	Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 300.00	
s	UBTOTAL of Receipts This Page (optional)			850.00
T	OTAL This Period (last page this line number or	nly)		

SCHEDULE A (FEC For	m 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 13 / 73
ITEMIZED RECEIPTS	, 	or each category of the Detailed Summary Page	(check only one)    X   11a
Any information copied from such Rep or for commercial purposes, other than	orts and Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) PlastyPAC			
Full Name (Last, First, Middle Initia Dr. William Wade Collison Mailing Address 1050 Gail Ga	,		Date of Receipt  0 7 0 2 7 2 0 0 6
City Prescott	State AZ	Zip Code 86305	Transaction ID: SA11A1.4560  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer Self	Occupatio Physicia	n	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initia	, 		Date of Receipt
Mailing Address 124 Columbia	Turnpike		07 05 2006
City	State	Zip Code	Transaction ID: SA11A1.4585
Florham Park  FEC ID number of contributing federal political committee.	C	07932	Amount of Each Receipt this Period  500.00
Name of Employer Self	Occupatio Physicia		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initia	l)		Date of Receipt
Mailing Address PO Box 2085			0 7 0 3 7 2 0 0 6
City	State	Zip Code	Transaction ID: SA11A1.4566
Lake Charles  FEC ID number of contributing federal political committee.	C	70602	Amount of Each Receipt this Period  300.00
Name of Employer Self	Occupatio Physicial		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (	optional)		1300.00
TOTAL This Period (last page this lir	e number only)		

S	SCHEDULE A (FEC Form 3X)		JLE A (FEC Form 3X)	
	· ·		Use separate schedule(s) or each category of the	(check only one)
Ш	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
An	y information copied from such Reports and Sta	atements may	not be sold or used by any person	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the r	name and add	lress of any political committee to	o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	PlastyPAC			
$\angle$				
Δ	Full Name (Last, First, Middle Initial) Dr. Mark Constantian			Date of Receipt
۸.	Mailing Address 19 Tyler St., Ste. 302			M M / D D / Y Y Y Y
	19 Tyler St., Ste. 302			07 12 2006
	City	State	Zip Code	Transaction ID: SA11A1.4721
	Nashua	NH	03060	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		250.00
	Name of Employer Self	Occupation		
	Descipt Form	Physician		_
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)	' '	250.00	
	Curior (openity)			J
_	Full Name (Last, First, Middle Initial)			
В.				Date of Receipt
	Mailing Address 145 St. peters Centre B	lvd.		M M / D D / Y Y Y Y
	-			07 24 2006
	City	State	Zip Code	Transaction ID: SA11A1.4835
	Saint Peters	MO	63376	Amount of Each Receipt this Period
	FEC ID number of contributing	С		500.00
	federal political committee.	0		
	Name of Employer	Occupation	1	7
	Self	Physician		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		500.00	7
	Other (specify)		500.00	
C.	Full Name (Last, First, Middle Initial) Dr. J.L Crow			Date of Receipt
C.	Mailing Address 1428 Central Ave. NE			M M / D D / Y Y Y Y
	1428 Gentral Ave. NE			08 03 2006
	City	State	Zip Code	Transaction ID: SA11A1.4927
	East Grand Forks	MN	36725	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		150.00
	Name of European	10		_
	Name of Employer Self	Occupation PHysician		
	Receipt For:		Year-to-Date ▼	$\dashv$
	Primary General	Ayyreyale	Todi-to-Date ▼	-
	Other (specify)		450.00	
				4
s	UBTOTAL of Receipts This Page (optional)		<b>.</b>	900.00
$\vdash$	ago (optional)			

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 15 / 73
ITEMIZED RECEIPTS	· · · · · · · · · · · · · · · · · · ·	or each category of the	(check only one)
TI LIVIIZED TILOLII TO	,	Detailed Summary Page	X   11a   11b   11c   12
Any information copied from auch	Departs and Statements may	, not be cold or used by any pers	on for the purpose of soliciting contributions
or for commercial purposes, other	r than using the name and add	dress of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In F	-ull)		
PlastyPAC			
Full Name (Last, First, Middle Dr. David Csikai	,		Date of Receipt
Mailing Address 8823 San	Jose Blvd., Ste. 301		08 18 2006
City	State	Zip Code	Transaction ID: SA11A1.5030
<u>Jacksonville</u>	FL	32217	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		300.00
Name of Employer Self	Occupation Physician		
Receipt For:		Year-to-Date <b>V</b>	_
Primary Gener			
Other (specify) ▼		300.00	
Full Name (Last, First, Middle B. Dr. Jean Cukier	Initial)		Date of Receipt
Mailing Address 7400 Fan	in St., Ste. 1280	08 13 2006	
City	State	Zip Code	Transaction ID: SA11A1.5014
<u>Houston</u>	TX	77054	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Self	Occupation Physician		
Receipt For:		Year-to-Date ▼	
Primary Gener Other (specify) ▼	al	250.00	
Full Name (Last, First, Middle	Initial)		
C. Dr. Jean Cukier			Date of Receipt
Mailing Address 7400 Fan	in St., Ste. 1280	09 / 09 / 2006	
City	State	Zip Code	Transaction ID: SA11A1.5109
Houston	TX	77054	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Self	Occupation Physician		
Receipt For:	Aggregate	Year-to-Date ▼	
Primary Gener Other (specify) ▼	al	500.00	
SUBTOTAL of Receipts This Pa	age (optional)		800.00
TOTAL This Period (last page th	<u> </u>		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedu or each category of the Detailed Summary Pa	ne (check only one)
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by a e name and address of any political com	any person for the purpose of soliciting contributions imittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) PlastyPAC		
Full Name (Last, First, Middle Initial) Dr. Gary Culbertson  Mailing Address 18 Miller Rd.  City Sumter  FEC ID number of contributing federal political committee.  Name of Employer Self  Receipt For: Primary Other (specify)	State Zip Code SC 29150  C  Occupation Physician Aggregate Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. James Cullington Mailing Address 1010 9th St.  City Austin  FEC ID number of contributing federal political committee.  Name of Employer Self	State Zip Code TN 78703  C  Occupation Physician	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	0.00
Full Name (Last, First, Middle Initial) Dr. Bruce Cunningham Mailing Address 420 Delaware St., SE MMC 122 FUMC City Minneapolis FEC ID number of contributing federal political committee.  Name of Employer Self  Receipt For: Primary General Other (specify)	State Zip Code MN 55455  C  Occupation PHysician Aggregate Year-to-Date ▼	Date of Receipt  M M J 16 2006  Transaction ID: SA11A1.5028  Amount of Each Receipt this Period  1000.00
SUBTOTAL of Receipts This Page (optional)		2500.00
TOTAL This Period (last page this line number	r only)	

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		or each category of the	X 11a 11b 11c 12
		Detailed Summary Page	13 14 15 16 17
Any information copied from such Reports and Sta or for commercial purposes, other than using the n	atements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
PlastyPAC			
Full Name (Last, First, Middle Initial)  A. Dr. Hootan Daneshmand			Date of Receipt
Mailing Address 27462 Portola Pkwy., St	te. 100		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: SA11A1.4621
Foot Hill Ranch	CA	92610	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		300.00
Name of Employer Self	Occupation Physician		
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		300.00	
Full Name (Last, First, Middle Initial)  3. Dr. Glenn Davis			Date of Receipt
Mailing Address 2304 Wesvill Court, Ste			07 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Raleigh	State NC	Zip Code 27607	Transaction ID: SA11A1.4605
FEC ID number of contributing		27007	Amount of Each Receipt this Period
federal political committee.	C		250.00
Name of Employer Self	Occupation Physician		
Receipt For:		e Year-to-Date ▼	-
Primary General		500.00	1
Other (specify) ▼	0 0	000.00	
Full Name (Last, First, Middle Initial)  Dr. Glenn Davis			Date of Receipt
Mailing Address 2304 Wesvill Court, Ste	. 360		08 12 2006
City	State	Zip Code	Transaction ID: SA11A1.4993
Raleigh	NC	27607	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		750.00
Name of Employer Self	Occupation Physician		
Receipt For:		e Year-to-Date ▼	7
Primary General Other (specify) ▼	1 1	1250.00	
SUPTOTAL of Descipto This Desc (anticest)			1300.00
SUBTOTAL of Receipts This Page (optional)			
TOTAL This Period (last page this line number or	nly)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 18 / 73 (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X   11a
An or	y information copied from such Reports and Stator commercial purposes, other than using the national states.	tements may ame and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) PlastyPAC			
۹.	Full Name (Last, First, Middle Initial) Dr. Arthur Debaise  Mailing Address 242 Loch Lomond Dr.			Date of Receipt
				07 24 2006
	City Winter park	State FL	Zip Code 32792	Transaction ID: SA11A1.4841  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	JET JE	250.00
	Name of Employer Self	Occupation Physician		
	Receipt For:  ☐ Primary ☐ General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
3.	Full Name (Last, First, Middle Initial) Dr. Barry Dibernardo			Date of Receipt
	Mailing Address 29 Park St.			09 05 Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.5095
	Montclair	NJ	07042	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Self	Occupation Physician		
	Receipt For:		Year-to-Date ▼	-
	Primary General Other (specify)		500.00	
<b>-</b> C.	Full Name (Last, First, Middle Initial) Dr. William Dowden			Date of Receipt
	Mailing Address 715 Shaker Dr., Ste 100			08 15 2006
	City	State	Zip Code	Transaction ID: SA11A1.5003
	Lexington	KY	40504	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Self	Occupation Physician		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 300.00	
s	UBTOTAL of Receipts This Page (optional)			1050.00
T	OTAL This Period (last page this line number or	nly)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 19 / 73 (check only one)  X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) PlastyPAC			
۹.	Full Name (Last, First, Middle Initial) Dr. Susan Downey	170		Date of Receipt
	Mailing Address 1301 Twentieth St., Ste.	470		07 05 2006
	City Santa Monica	State CA	Zip Code	Transaction ID: SA11A1.4580
	FEC ID number of contributing federal political committee.	C	90404	Amount of Each Receipt this Period  250.00
	Name of Employer Self	Occupation Physician		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
3.	Full Name (Last, First, Middle Initial) Dr. Ronald Downs			Date of Receipt
	Mailing Address 500 Aracade Ave., Ste. 3	08 13 2006		
	City	State	Zip Code	Transaction ID: SA11A1.4983
	Elkhart F50 ID analysis (contribution)	IN	46514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Self	Occupation Physcian		
	Receipt For:		Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
).	Full Name (Last, First, Middle Initial) Dr. Lee Edstrom			Date of Receipt
	Mailing Address 2 Dudley St. MOC, Ste 4	160		07 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Providence	State RI	Zip Code 02905	Transaction ID: SA11A1.4757
	FEC ID number of contributing federal political committee.	C	02905	Amount of Each Receipt this Period  300.00
	Name of Employer Self	Occupation Physician	1	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 300.00	
SI	UBTOTAL of Receipts This Page (optional)			1050.00
T	OTAL This Period (last page this line number or	nly)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 20 / 73	
TEMIZED RECEIPTS			or each category of the	(check only one)	
•			Detailed Summary Page	X   11a   11b   11c   12   13   14   15   16   11	7
An	ny information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	not be sold or used by any perso		
or		ame and add	dress of any political committee to	solicit contributions from such committee.	_
$\rangle$	NAME OF COMMITTEE (In Full) PlastyPAC				
۸.	Full Name (Last, First, Middle Initial) Dr. Michael Epstein			Date of Receipt	
	Mailing Address 1535 Lake Cook Rd., Sto		7.0	09 / 05 / 2006	
	City Northbrook	State IL	Zip Code	Transaction ID: SA11A1.5105	
			60062	Amount of Each Receipt this Period	1
	FEC ID number of contributing federal political committee.	C		500.00	
	Name of Employer Self	Occupation Physician			
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼		
	Other (specify) ▼		500.00		
3.	Full Name (Last, First, Middle Initial) Dr. Gregory Evans			Date of Receipt	
	Mailing Address 200 S. Manchester			07 30 7 2006	
	City	State	Zip Code	Transaction ID: SA11A1.4875	
	Orange	CA	92868	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		1000.00	
	Name of Employer Self	Occupation PHysicia			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼		1000.00		
 D.	Full Name (Last, First, Middle Initial) Dr. J. B. Fine			Date of Receipt	
	Mailing Address 17759 SW 2nd St.			09 / 20 / Y Y Y Y Y	
	City	State	Zip Code	Transaction ID: SA11A1.5148	
	Penbroke Pines	FL	33029	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		300.00	
	Name of Employer Self	Occupation Physician			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼	0 0	300.00		
s	UBTOTAL of Receipts This Page (optional)			1800.00	]
_			·		1
T	OTAL This Period (last page this line number or	1ly)			4

S	CHEDULE A (FEC Form 3X)		11	FOR LINE NUMBER: PAGE 21 / 73
ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the		(check only one)
II EIVIIZED NECEIP 13			Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar	ny information copied from such Reports and Sta for commercial purposes, other than using the r	atements may	not be sold or used by any person	on for the purpose of soliciting contributions
0.	NAME OF COMMITTEE (In Full)	arric aria ado	ress of any political committee to	o solicit contributions from such confinitiec.
	` '			
	PlastyPAC			
<u>/</u>	Full Name (Last, First, Middle Initial)			
A.				Date of Receipt
	Mailing Address 2200 Sunrise Blvd., Ste	. 250		07 13 2006
	City	State	Zip Code	Transaction ID: SA11A1.4693
	Rancho Cordova	CA	95670	
		- OA	93070	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Self	Occupation		
	Pagaint For:	Physician		
	Receipt For:  Primary  General	Aggregate	Year-to-Date ▼	,
	Other (specify)		500.00	
_	Full Name (Last, First, Middle Initial)			
В.				Date of Receipt
	Mailing Address 7100 W. 20th Blvd., Ste	e. 110		08 26 2006
	City	State	Zip Code	Transaction ID: SA11A1.5064
	Hialeah	FL	33016	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		300.00
	Name of Employer	Occupation		_
	Self	Occupation PHysician		
	Receipt For:		Year-to-Date ▼	
	Primary General	199.194.11		1
	Other (specify) ▼		300.00	
C.	Full Name (Last, First, Middle Initial) Dr. Lloyd Gayle			Date of Receipt
Ο.	Mailing Address 50 East 69th St., 4th flo	or		M M / D D / Y Y Y Y
	30 Last 05th 6t., 4th 110	Oi		09 25 2006
	City	State	Zip Code	Transaction ID: SA11A1.5153
	New York	NY	10021	Amount of Each Receipt this Period
	FEC ID number of contributing	C		250.00
	federal political committee.			230.00
	Name of Employer Self	Occupation	1	
	Self	Physician		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		250.00	1
	Other (specify)		250.00	1
_	LIDTOTAL of Descipto This Descriptors II			1050.00
$\vdash$	UBTOTAL of Receipts This Page (optional)			
1				

SCHEDULE A (FEC Form 3X)  Use separate schedule(s)			Use separate schedule(s)	FOR LINE NUMBER:	PAGE 22/73
ITEMIZED RECEIPTS			or each category of the	(check only one)	🗖
THE MILES HE SEN TO			Detailed Summary Page	X 11a 11b 1	11c   12 15   16   17
Δ,	ny information copied from such Reports and St	estamanta mai	, not be cold or used by any nerge		
or	for commercial purposes, other than using the	solicit contributions from s	uch committee.		
$\setminus$	NAME OF COMMITTEE (In Full)				
$  \rangle$	PlastyPAC				
$\angle$				_	
Δ	Full Name (Last, First, Middle Initial) Dr. William Georgis			Date of Receipt	
Α.	Mailing Address 6030 Garrett Lane			M M / D D	/ Y
	Walling Address 0000 Garrett Laire			08 13	2006
	City	State	Zip Code	Transaction ID: SA	11A1.4979
	Rockford	IL	61107	Amount of Each Rec	eipt this Period
	FEC ID number of contributing	C			300.00
	federal political committee.				500.00
	Name of Employer	Occupation	n		
	Self	Physiciar			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General		300.00	1	
	Other (specify) ▼				
_	Full Name (Last, First, Middle Initial)				
В.	Dr. Scot Glasberg			Date of Receipt	
	Mailing Address 42A East 74th St.			M M / D D	/ <b>Y Y Y Y</b>
	-			09 05	2006
	City	State Zip Code		Transaction ID: SA	
	New York	NY 10021		Amount of Each Rec	eipt this Period
	FEC ID number of contributing federal political committee.	C			1008.00
	•				
	Name of Employer Self	Occupation			
		Physician		_	
	Receipt For:  Primary  General	Aggregate	e Year-to-Date ▼	,	
	Other (specify)		1008.00		
				1	
_	Full Name (Last, First, Middle Initial)				
C.	Dr. Kimberly Goh			Date of Receipt	
	Mailing Address 4610 Oleander Dr., Ste	. 101		0 8 1 6	2006
	City	State	Zip Code	Transaction ID: SA	
	Myrtle Beach	SC	29577	Amount of Each Rec	
	FEC ID number of contributing				<del> </del>
	federal political committee.	C			300.00
	Name of Employer		n	$\dashv$	
Receipt For:		Occupation Physician			
			e Year-to-Date ▼		
Primary General Other (specify) ▼			000.00	1	
			300.00		
_					
					1608.00
Ls	UBTOTAL of Receipts This Page (optional)		······	-	
_	OTAL This Deviced (least name this line was the	anlı ()			
1 1	OTAL This Period (last page this line number of	וווע) וווע	·······		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 23 / 73	
ITEMIZED RECEIPTS		or each category of the		(check only one)	
••	EMIZED HEGEN 10		Detailed Summary Page	X 11a 11b 11c 12	
Δ.	ny information copied from such Reports and St	otomonto mov	r not be cold or used by any nore	13 14 15 16 17	
or	for commercial purposes, other than using the	osolicit contributions from such committee.			
$\setminus$	NAME OF COMMITTEE (In Full)				
$\rangle$	PlastyPAC				
A.	Full Name (Last, First, Middle Initial) Dr. Roger Gordon			Date of Receipt	
	Mailing Address 4300 N. Universtiy Dr.,	Ste. A-202		09 14 2006	
	City	State	Zip Code	Transaction ID: SA11A1.5140	
	Lauderhill	FL	33351	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		250.00	
	Name of Employer Self	Occupation Physician			
	Receipt For:		Year-to-Date ▼		
	Primary General	1.99.19		7	
	Other (specify) ▼	0 0	250.00		
В.	Full Name (Last, First, Middle Initial) Dr. Robert Graper			Date of Receipt	
	Mailing Address 2915 Coltsgate, Ste. 10	07 25 2006			
	City	State	Zip Code	Transaction ID: SA11A1.4833	
	Charlotte	NC	28211	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		300.00	
	Name of Employer Self	Occupation Physician			
	Receipt For:		Year-to-Date ▼		
	Primary General Other (specify) ▼	0 0	300.00		
— С.	Full Name (Last, First, Middle Initial) Dr. Donald Griffin			Date of Receipt	
	Mailing Address 250 25th Ave. N, Ste. 3	16		M M / D D / Y Y Y Y	
	·			07 06 2006	
	City	State	Zip Code	Transaction ID: SA11A1.4611	
	Nashville	TN	37203	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		250.00	
	Name of Employer Self	Occupation Physician			
	Receipt For:		Year-to-Date ▼		
	Primary General Other (specify) ▼	0 0	250.00		
s	UBTOTAL of Receipts This Page (optional)			800.00	
$\vdash$	· · · · · · · · · · · · · · · · · · ·		•		
Ιт	OTAL This Period (last page this line number of	only)	I		

SCHEDULE A (FEC Form 3X)  Use separate schedule		Use separate schedule(s)	FOR LINE NUMBER:	PAGE 24 / 73	
ITEMIZED RECEIPTS			or each category of the	(check only one)	. —
THE MILES TREGET TO			Detailed Summary Page	X 11a 11b	11c 12 15 16 17
۸۰	y information copied from such Reports and St	otomonto mov	reat he cold or wood by any norce	13 14	
or	for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from s	such committee.
	NAME OF COMMITTEE (In Full)				
$\rangle$	PlastyPAC				
Α.	Full Name (Last, First, Middle Initial) Dr. John Griggs			Date of Receipt	
	Mailing Address 299 Crew St., Ste. 434			0 7 D D D D D D D D D D D D D D D D D D	2006
	City	State	Zip Code	Transaction ID: SA	\11A1.4857
	Springfield	MA	01104	Amount of Each Red	ceipt this Period
	FEC ID number of contributing federal political committee.	C			500.00
	Name of Employer Self	Occupation Physician			
	Receipt For:		e Year-to-Date ▼		
	Primary General		E00.00	1	
	Other (specify) ▼	0 0	500.00		
В.	Full Name (Last, First, Middle Initial) Dr. Jack Gunter			Date of Receipt	
	Mailing Address 8144 Walnut Hill Lane,	Ste. 170		07 / 29	2006
	City	State Zip Code		Transaction ID: SA	11A1.4899
	Dallas	TX	75231	Amount of Each Red	ceipt this Period
	FEC ID number of contributing federal political committee.	C			1000.00
	Name of Employer Self	Occupation Physician			
	Receipt For:	<u> </u>	Year-to-Date ▼		
	Primary General			1	
	Other (specify)	0 0	2000.00		
C.	Full Name (Last, First, Middle Initial) Dr. Roxanne Guy			Date of Receipt	
	Mailing Address 111 E. Hibiscus Blvd.			07 26	2006
	City	State	Zip Code	Transaction ID: SA	
	Melbourne	FL	32901	Amount of Each Red	ceipt this Period
	FEC ID number of contributing federal political committee.	C			1000.00
	Name of Employer Self	Occupation Physician			
	Receipt For:		e Year-to-Date ▼		
Primary General Other (specify) ▼			1000.00		
Cirici (opcony) 🔻				<u> </u>	
s	UBTOTAL of Receipts This Page (optional)		······		2500.00
<sub>T</sub>	OTAL This Period (last page this line number of	only)	<b>)</b>		

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 25 / 73
•		Use separate schedule(s) or each category of the		(check only one)
ITEMIZED RECEIPTS			Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar	y information copied from such Reports and St for commercial purposes, other than using the	atements may	not be sold or used by any person	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the	name and add	lress of any political committee to	o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	PlastyPAC			
<u></u>	Full Name (Last, First, Middle Initial)			
A.	Dr. Bahman Guyuron			Date of Receipt
	Mailing Address 29017 Cedar Rd.			07
	City	State	Zip Code	Transaction ID: SA11A1.4867
	Lyndhurst	OH	44124	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		500.00
	Name of Employer Self	Occupation		
		Physiciar		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		500.00	
	Other (specify) ▼			1
В.	Full Name (Last, First, Middle Initial) Dr. Jon Harrell			Date of Receipt
٥.	Mailing Address 2770 Oakbrook Ln.			M M / D D / Y Y Y Y
				08 09 2006
	City	State	Zip Code	Transaction ID: SA11A1.4957
	Weston	<u>FL</u>	33332	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		225.00
	rederal political committee.			
	Name of Employer Self	Occupation		
		Physician		
	Receipt For:  Primary  General	Aggregate	Year-to-Date ▼	-
	Other (specify)	' '	300.00	
	Cuter (speedily)	0 0		1
<u> </u>	Full Name (Last, First, Middle Initial) Dr. Jon Harrell			Date of Receipt
	Mailing Address 2770 Oakbrook Ln.			M M / D D / Y Y Y Y
				09 03 2006
	City	State	Zip Code	Transaction ID: SA11A1.5086
	Weston	<u>FL</u>	33332	Amount of Each Receipt this Period
	FEC ID number of contributing	С		225.00
	federal political committee.			
	Name of Employer Self	Occupation		
		Physician		_
	Receipt For:  Primary General	Aggregate	Year-to-Date ▼	-
	Primary General Other (specify) ▼		525.00	
	Strict (Specify) \	-	0 0 0 0 0 0 0	1
s	UBTOTAL of Receipts This Page (optional)		<b>_</b>	950.00
$\vdash$				-

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 26 / 73
ITEMIZED RECEIPTS			or each category of the	(check only one)
			Detailed Summary Page	X   11a   11b   11c   12   17   18   17   18   19   19   19   19   19   19   19
Δr	y information copied from such Reports and St	atomonte may	, not be sold or used by any perso	
or	for commercial purposes, other than using the	solicit contributions from such committee.		
$\setminus$	NAME OF COMMITTEE (In Full)			
	PlastyPAC			
Α.	Full Name (Last, First, Middle Initial) Dr. Elizabeth Harris			Date of Receipt
	Mailing Address 540 Madison Oak, Ste.	560		09 / 03 / 2006
	City	State	Zip Code	Transaction ID: SA11A1.5082
	San Antonio	TX	78258	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Self	Occupation Physician		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		500.00	1
	Other (specify)	0 0	300.00	
В.	Full Name (Last, First, Middle Initial) Dr. Robert Havlik			Date of Receipt
	Mailing Address 702 Barnhill Ave., Ste.	2511		08 13 2006
	City	State Zip Code		Transaction ID: SA11A1.4985
	Indianapolis	IN	46202	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Self	Occupation Physician		7
	Receipt For:	<u> </u>	· e Year-to-Date ▼	
	Primary General			1
	Other (specify) ▼	0 0	300.00	
C.	Full Name (Last, First, Middle Initial) Dr. Karl Hiatt			Date of Receipt
	Mailing Address 4540 East Baseline Rd	., Ste. 117		08 / 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.4921
	Mesa	AZ	85206	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Self	Occupation Physician		
	Receipt For:		e Year-to-Date ▼	
Primary General			250.00	1
	Other (specify) ▼	0 0	250.00	
s	UBTOTAL of Receipts This Page (optional)			1050.00
$\vdash$			•	-
т	OTAL This Period (last page this line number of	only)	<b>&gt;</b>	

0	CHEDIII E A /EEC Earm 2V)			FOR LINE NUMBER: PAGE 27 / 73
51	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		or each category of the		X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
_				
or	y information copied from such Reports and Sta for commercial purposes, other than using the n	atements may name and add	r not be sold or used by any personal ress of any political committee to	on for the purpose of soliciting contributions oscilcit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$\rangle$	PlastyPAC			
Α.	Full Name (Last, First, Middle Initial) Dr. Joseph Hirschfeld			Date of Receipt
	Mailing Address 3000 E. Fletcher Ave., S	Ste. 260		08 15 2006
	City	State	Zip Code	Transaction ID: SA11A1.5009
	Tampa	FL	33613	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Self	Occupation Physician		
	Receipt For:	<u> </u>	Year-to-Date ▼	
	Primary General	00 0		7
	Other (specify) ▼		500.00	
				-
В.	Full Name (Last, First, Middle Initial) Dr. Patrick Hodges			Date of Receipt
	Mailing Address 8220 Walnut Hill Lane,	M M / D D / Y Y Y Y		
		07 11 2006		
	City	State	Zip Code	Transaction ID: SA11A1.4681
	Dallas	TX	75231	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		500.00
	Name of Employer	Occupation	1	$\exists$
	Self	Physiciar	1	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	1 1	500.00	7
	Other (specify)		500.00	
C.	Full Name (Last, First, Middle Initial) Dr. Thomas Hubbard			Date of Receipt
	Mailing Address 396 S. Witchduck Rd., S	Ste. 100		07 / 30 / Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.4889
	Virginia Beach	VA	23462	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			500.00
	Name of Employer	Occupation	1	
	Self	Physician	1	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		<del></del>	7
	Other (specify)	1	500.00	
。	UBTOTAL of Receipts This Page (optional)			1500.00
$\vdash$	ODITION TO CEIPLE THIS I age (Optional)			

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 73 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) PlastyPAC			
Α.	Full Name (Last, First, Middle Initial) Dr. Robert Improta  Mailing Address 2460 N. Ponderosa Dr. Suite A117  City Camarillo  FEC ID number of contributing federal political committee.  Name of Employer Self  Receipt For:	State CA C Occupation Physician Aggregate		Date of Receipt  O 7 O 4 2 0 0 6  Transaction ID: SA11A1.4597  Amount of Each Receipt this Period  500.00
	Primary General Other (specify) ▼		500.00	
3.	Full Name (Last, First, Middle Initial) Dr. William Jervis  Mailing Address 1844 San Miguel Dr. Suite 109  City  Walnut Creek  FEC ID number of contributing federal political committee.  Name of Employer Self  Receipt For: Primary General Other (specify)	State CA C Occupation Physician Aggregate		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
<b>C</b> .	Full Name (Last, First, Middle Initial) Dr. Brandon Kallman Mailing Address 4701 N. Meridian Ave., City Miami FEC ID number of contributing federal political committee.	State FL	Zip Code 33140	Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Employer Self  Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate		
s	UBTOTAL of Receipts This Page (optional)			1050.00
T	OTAL This Period (last page this line number o	nlv)	<b>.</b>	

PAGE 29 / 73 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) **PlastyPAC** Full Name (Last, First, Middle Initial) Date of Receipt A. Dr. Susan Kaweski Mailing Address 3444 kearny Villa Rd., Ste. 401 2006 16 City State Zip Code Transaction ID: SA11A1.4759 San Diego CA 92123 Amount of Each Receipt this Period FEC ID number of contributing 300.00 C federal political committee. Name of Employer Self Occupation Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Robert Kearney Date of Receipt Mailing Address PO Box 927072 02 2006 City State Zip Code Transaction ID: SA11A1.4558 San Diego CA 92192 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Self Occupation Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. Dr. John Kelleher Date of Receipt Mailing Address 1810 Coulter Dr. 16 2006 Zip Code City State Transaction ID: SA11A1.4751 Amarillo TX 79106 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer Self Occupation Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1800.00 SUBTOTAL of Receipts This Page (optional) .....

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 30 / 73
	EMIZED RECEIPTS		or each category of the	(check only one)
••			Detailed Summary Page	X   11a   11b   11c   12   15   16   17
An	y information copied from such Reports and St	atements may	not be sold or used by any person	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the	solicit contributions from such committee.		
$\setminus$	NAME OF COMMITTEE (In Full)			
	PlastyPAC			
Α.	Full Name (Last, First, Middle Initial) Dr. Carolyn Kerrigan			Date of Receipt
	Mailing Address 1 Medical Center Dr.			M M / D D / Y Y Y Y Y O O O O O O O O O O O O O O
	City	State	Zip Code	Transaction ID: SA11A1.5129
	Lebanon	NH	03756	Amount of Each Receipt this Period
	FEC ID number of contributing		33.33	
	federal political committee.	C		1000.00
	Name of Employer Self	Occupation Physician		
	Receipt For:		Year-to-Date <b>V</b>	
	Primary General	7 1991 09410		1
	Other (specify) ▼	0 0	1000.00	
_	Full Name (Last, First, Middle Initial)			
В.		Date of Receipt		
	Mailing Address 180 Crandon Blvd., Ste	07 29 2006		
	City	State	Zip Code	Transaction ID: SA11A1.4923
	Key Biscayne	FL 33149		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Self	Occupation		
		Physician		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	,
	Other (specify)		300.00	
	Full Name (Last, First, Middle Initial)			
C.	Dr. David Klein			Date of Receipt
	Mailing Address 398 Copperfield Blvd., I	NE		07 30 7 2006
City Concord		State	Zip Code	Transaction ID: SA11A1.4869
		NC	28025	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer Self	Occupation Physician		
	Receipt For:		Year-to-Date ▼	
	Primary General		500.00	1
	Other (specify) ▼	0 0	500.00	
		1800.00		
S	UBTOTAL of Receipts This Page (optional)	1000.00		
T	OTAL This Period (last page this line number o	only)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 31 / 73
ıT	EMIZED RECEIPTS		or each category of the	(check only one)
Ш	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			,	13 14 15 16 17
Ar or	ly information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	PlastyPAC			
Α.	Full Name (Last, First, Middle Initial) Dr. Louis Korngold			Date of Receipt
	Mailing Address 125 S. Main St.	08 08 2006		
	City	State	Zip Code	Transaction ID: SA11A1.4950
	New City	NY	10956	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Self	Occupation Physician		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General			1
	Other (specify) ▼	0 0	300.00	
В.	Full Name (Last, First, Middle Initial) Dr. Phillip Lambruschi			Date of Receipt
	Mailing Address 350 S. 8th St.			08 04 2006
	City	State	Zip Code	Transaction ID: SA11A1.4945
	West Dundee	ID	60118	Amount of Each Receipt this Period
	FEC ID number of contributing	С		200.00
	federal political committee.	300.00		
	Name of Employer Self	Occupation Physician		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		000.00	1
	Other (specify)	0 0	600.00	
<u>С</u> .	Full Name (Last, First, Middle Initial) Dr. Lloyd Landsman			Date of Receipt
	Mailing Address 994 West Jericho Turnp	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: SA11A1.5001
	Smithtown	NY	11787	
	FEC ID number of contributing	C	11707	Amount of Each Receipt this Period 500.00
	federal political committee.			
	Name of Employer Self	Occupation Physician	า	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		500.00	1
	Other (specify) ▼	0 0	500.00	
[	UBTOTAL of Receipts This Page (optional)			900.00
L³	ODI OTAL OF RECEIPTS THIS Page (Optional)	·····	·····	

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 32 / 73
•			Use separate schedule(s) or each category of the	(check only one)
Ш	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar	y information copied from such Reports and Sta	atements may	not be sold or used by any person	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the r	name and add	ress of any political committee to	o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	PlastyPAC			
$\angle$				
Δ	Full Name (Last, First, Middle Initial) Dr. John Lang			Date of Receipt
<i>~</i>	Mailing Address 2020 21st St.			M M / D D / Y Y Y Y
	2020 2181 31.			07 09 2006
	City	State	Zip Code	Transaction ID: SA11A1.4606
	Bakersfield	CA	93301	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		300.00
	Name of Employer Self	Occupation		
	Descipt Form	Physician		
	Receipt For:  Primary  General	Aggregate	Year-to-Date ▼	-
	Other (specify)	' '	300.00	
	Cure (epochy) \			1
_	Full Name (Last, First, Middle Initial)			
В.				Date of Receipt
	Mailing Address 3680 Wilshire Blvd., Ste	e. 202		M M / D D / Y Y Y Y
				07 06 2006
	City	State	Zip Code	Transaction ID: SA11A1.4595
	Los Angeles	CA	90010	Amount of Each Receipt this Period
	FEC ID number of contributing	С		500.00
	federal political committee.			300.00
	Name of Employer	Occupation	1	-
	Self	Physician		
	Receipt For:		Year-to-Date ▼	
	Primary General	00 0		1
	Other (specify) ▼	1	500.00	
_	Full Name (Last, First, Middle Initial)			Pate of Parent
C.	Dr. Brett Lehocky			Date of Receipt
	Mailing Address 450 Monte Vista Dr.			07 11 2006
	City	State	Zip Code	Transaction ID: SA11A1.4683
	Santa Paula	CA	93060	Amount of Each Receipt this Period
			00000	Amount of Each recorpt this rende
	FEC ID number of contributing federal political committee.	C		500.00
	'			
	Name of Employer Self	Occupation		
		Physician		
	Receipt For:	Aggregate	Year-to-Date ▼	_
	Primary General		500.00	] [
	Other (specify)			1
_	LIDTOTAL of Descripts This Descriptor 1			1300.00
∟ <sup>s</sup>	UBTOTAL of Receipts This Page (optional)		······	
1				

SC	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 33 / 73
	EMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one)  X 11a 11b 11c 12  13 14 15 16 17
An or	y information copied from such Reports and States for commercial purposes, other than using the r	atements may	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) PlastyPAC			
Full Name (Last, First, Middle Initial) Dr. Dann Leonard  Mailing Address 700 Bellevue St., Ste. 280				Date of Receipt  0 9 1 3 2 0 0 6
	City Salem	State OR	Zip Code 97301	Transaction ID: SA11A1.5142  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1 1	250.00
	Name of Employer Self	Occupation Physician	า	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
3.	Full Name (Last, First, Middle Initial) Dr. Stephen Lex			Date of Receipt
	Mailing Address 1020 N. San Francisco			07 02 2006
	City	State	Zip Code	Transaction ID: SA11A1.4599
	Flagstaff FEC ID number of contributing federal political committee.	C	86001	Amount of Each Receipt this Period  1000.00
	Name of Employer Self	Occupation Physician		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
	Full Name (Last, First, Middle Initial) Dr. Robert Ley			Date of Receipt
Mailing Address 150 Carnation Dr., Ste. 4				0 7 1 7 2 0 0 6
	City	State	Zip Code	Transaction ID: SA11A1.4719
	Freedom	CA	95019	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer Self	Occupation Physician	1	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
SI	JBTOTAL of Receipts This Page (optional)			1750.00
т	OTAL This Period (last page this line number o	nly)		

PAGE 34 / 73 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page \_17** 13 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) **PlastyPAC** Full Name (Last, First, Middle Initial) Date of Receipt A. Dr. Mario Loomis Mailing Address 225 Dolson Ave., Ste. 302 07 25 2006 City State Zip Code Transaction ID: SA11A1.4891 Middletown NY 10940 Amount of Each Receipt this Period FEC ID number of contributing 300.00 C federal political committee. Name of Employer Self Occupation Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr.q William Loufty Date of Receipt Mailing Address 10400 Academy NE 14 2006 Suite 230 City State Zip Code Transaction ID: SA11A1.4702 <u>Albuquerque</u> NM 87111 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Self Occupation Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. Dr. Paul Lowenstein Date of Receipt Mailing Address 2300 N. Mayfair Rd. Ste. 795 08 0 4 2006 Zip Code Citv State Transaction ID: SA11A1.4955 Milwaukee WI 53226 Amount of Each Receipt this Period FEC ID number of contributing 300.00 C federal political committee. Name of Employer Self Occupation Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 1100.00 SUBTOTAL of Receipts This Page (optional) .....

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 73 (check only one)  X 11a 11b 11c 12
An	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) PlastyPAC		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Α.	Full Name (Last, First, Middle Initial) Dr. Dennis Lynch Mailing Address 2401 S. 31st.  City State Zip Code Temple TX 76508  FEC ID number of contributing federal political committee.			Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Employer Self  Receipt For: Primary General Other (specify)	Occupation Physician Aggregate		
3.	Full Name (Last, First, Middle Initial) Dr. Debora Ma Mailing Address 2668 North park Dr., Ste	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: SA11A1.5151
	Lafayette  FEC ID number of contributing federal political committee.	CO	80026	Amount of Each Receipt this Period  300.00
	Name of Employer Self  Receipt For:  Primary General  Other (specify) ▼	Occupation Physician Aggregate		
 C.	Full Name (Last, First, Middle Initial)  Dr. Lee Malan			Date of Receipt
	Mailing Address 3955 Harrison Blvd., ste			09 / 22 / 4 2006
	City Ogden	State UT	Zip Code 84403	Transaction ID: SA11A1.5150  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	OTTO	500.00
	Name of Employer Self	Occupation Physician	1	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00	
SI	JBTOTAL of Receipts This Page (optional)			1050.00
T	OTAL This Period (last page this line number or	nly)		

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 36 / 73
•			Use separate schedule(s) or each category of the	(check only one)
Ш	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar	y information copied from such Reports and Sta	tements may	not be sold or used by any person	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the r	ame and add	lress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	PlastyPAC			
_	Full Name (Last First Middle Initial)			
A.	Full Name (Last, First, Middle Initial) Dr. Eric Mariotti			Date of Receipt
	Mailing Address 2222 East St., Ste. 310			M M / D D / Y Y Y Y
	-			07 23 2006
	City	State	Zip Code	Transaction ID: SA11A1.4831
	Concord	CA	94520	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer	Occupation	1	7
	Self	Physician	1	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		050.00	1
	Other (specify) ▼		250.00	
В.	Full Name (Last, First, Middle Initial) Dr. James Marsh			Date of Receipt
	Mailing Address 2677 S. Tamiami Trail	M M / D D / Y Y Y Y		
				07 06 2006
	City	State	Zip Code	Transaction ID: SA11A1.4643
	Sarasota	FL	34239	Amount of Each Receipt this Period
	FEC ID number of contributing	С		500.00
	federal political committee.			
	Name of Employer	Occupation	1	
	Self	Physician	1	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	' '	500.00	1
	Other (specify)			J
_	Full Name (Last, First, Middle Initial)			Patro ( Parairi
C.	Dr. David Martin  Mailing Address 7777 Forest Lane, Ste. C-625			Date of Receipt
	Walling Address //// Forest Larie, Ste.	09 08 2006		
	City	State	Zip Code	Transaction ID: SA11A1.5112
	Dallas	TX	75230	Amount of Each Receipt this Period
	FEC ID number of contributing			300.00
	federal political committee.			300.00
	Name of Employer Self	Occupation		
	Filysciaiii			
	Primary General		Year-to-Date ▼	
			300.00	1
	Other (specify)		500.00	1
	LIDTOTAL of Desciols This Description II			1050.00
L	UBTOTAL of Receipts This Page (optional)			
1				

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 37 / 73	
ITEMIZED RECEIPTS			or each category of the	(check only one)	
			Detailed Summary Page	X   11a   11b   11c   12   15   16	17
An	ny information copied from such Reports and Stat for commercial purposes, other than using the na	tements may	not be sold or used by any perso		$\stackrel{\cdot \cdot \cdot}{\dashv}$
or		solicit contributions from such committee.			
$\rangle$	NAME OF COMMITTEE (In Full) PlastyPAC				
۸.	Full Name (Last, First, Middle Initial) Dr. James Matas			Date of Receipt	
	Mailing Address 7300 Sandlake Commor Suite 100		7: 0 :	07 11 2006	
	City Orlando	State FL	Zip Code 32819	Transaction ID: SA11A1.4670  Amount of Each Receipt this Period	
	FEC ID number of contributing		32019		7
	federal political committee.	C		500.00	
	Name of Employer Self	Occupation Physiciar			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼	0 0	500.00		
 3.	Full Name (Last, First, Middle Initial) Dr. Michael McGuire			Date of Receipt	
	Mailing Address 552 Stassi Lane			0 9 0 4 2 0 0 6	
	City	State	Zip Code	Transaction ID: SA11A1.5101	
	Santa Monica	CA	90402	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		1000.00	
	Name of Employer Self	Occupation		7	
	Receipt For:	Physician	n e Year-to-Date ▼	-	
	Primary General	Aggregate			
	Other (specify) ▼		1000.00		
<b>D.</b>	Full Name (Last, First, Middle Initial) Dr. G. Robert Meger			Date of Receipt	
	Mailing Address 3333 E. Camelback Rd.,	Ste. 140		07 03 7 2006	
	City	State	Zip Code	Transaction ID: SA11A1.4568	
	Phoenix	AZ	85018	Amount of Each Receipt this Period	-
	FEC ID number of contributing federal political committee.	C		250.00	
	Name of Employer Self	Occupation Physician			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼		250.00		
s	UBTOTAL of Receipts This Page (optional)			1750.00	
	·		·		7
T	OTAL This Period (last page this line number on	ıly)	<b>&gt;</b>		_

ITE	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 73 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any or fo	information copied from such Reports and Stater commercial purposes, other than using the na	ements may ame and add	not be sold or used by any persoress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\	AME OF COMMITTEE (In Full) PlastyPAC			
	ull Name (Last, First, Middle Initial) rr. Toby Meltzer			Date of Receipt
N	failing Address 7025 N. Scottsdale Rd. Suite 302			07 16 2006
	ity	State	Zip Code	Transaction ID: SA11A1.4753
	Scottsdale	AZ	85253	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		500.00
N S	ame of Employer elf	Occupation Physician		
R	eceipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	1 1	500.00	
	ull Name (Last, First, Middle Initial)			Data of Bassist
_	or. William Merkel Mailing Address 2525 N. 8th St., Ste. 203			Date of Receipt    M M
C	ity	State	Zip Code	Transaction ID: SA11A1.4991
<u>C</u>	Grand Junction	CO	81501	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		250.00
N S	lame of Employer Self	Occupation Physician		
R	leceipt For:		Year-to-Date ▼	-
	Primary General Other (specify) ▼		250.00	
_	ull Name (Last, First, Middle Initial) rr. Basil Michaels			Date of Receipt
Mailing Address 426 South St.				07 12 7 2006
	ity	State	Zip Code	Transaction ID: SA11A1.4711
_	Pittsfield	MA	01201	Amount of Each Receipt this Period
fe	EC ID number of contributing ederal political committee.	C		500.00
N S	ame of Employer elf	Occupation Physician		
R	eceipt For:	Aggregate	Year-to-Date ▼	
	Primary		500.00	
SUE	BTOTAL of Receipts This Page (optional)			1250.00
	,			

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 39 / 73		
•		Use separate schedule(s) or each category of the		(check only one)		
ITEMIZED RECEIPTS		Detailed Summary Page		X 11a 11b 11c 12		
				13 14 15 16 17		
Ar	y information copied from such Reports and Sta	tements may	not be sold or used by any person	on for the purpose of soliciting contributions		
or	for commercial purposes, other than using the n	ame and add	lress of any political committee to	solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)					
$ \rangle$	PlastyPAC					
$\angle$						
Δ	Full Name (Last, First, Middle Initial) Dr. Basil Michaels			Date of Receipt		
	Mailing Address 426 South St.			M M / D D / Y Y Y Y		
	420 Oddin Ot.			07 23 2006		
	City	State	Zip Code	Transaction ID: SA11A1.4849		
	Pittsfield	MA	01201	Amount of Each Receipt this Period		
	FEC ID number of contributing					
	federal political committee.	C		500.00		
				_		
	Name of Employer Self	Occupation				
	Daniel Ferr	Physician				
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	-		
	Other (specify)	' '	1000.00			
	Carior (openity) 🔻			1		
_	Full Name (Last, First, Middle Initial)					
В.				Date of Receipt		
	Mailing Address 17900 NW 5th St., Ste.	205		M M / D D / Y Y Y Y		
				08 12 2006		
	City	State	Zip Code	Transaction ID: SA11A1.4987		
	Pembroke Pines	FL	33029	Amount of Each Receipt this Period		
	FEC ID number of contributing	С		300.00		
	federal political committee.	<u> </u>		000.00		
	Name of Employer	Occupation	1	-		
	Self	Physician				
	Receipt For:		Year-to-Date ▼			
	Primary General			1		
	Other (specify) ▼	1	300.00			
				-		
_	Full Name (Last, First, Middle Initial)					
C.	Dr. Alexander Nein			Date of Receipt		
	Mailing Address 2011 Murphy Ave., Ste.	08 02 2006				
	City	State	Zip Code	Transaction ID: SA11A1.4925		
	Nashville	TN	37203	Amount of Each Receipt this Period		
		111	37203	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		500.00		
	Name of Employer Self	Occupation				
		Physician				
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General		500.00	11		
	Other (specify)		300.00	1		
_						
_				1300.00		
Ls	UBTOTAL of Receipts This Page (optional)		······	1000.00		
1						

SCHED	OULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NU	
TEMIZED RECEIPTS			or each category of the	(check only on	<i>′</i> — —
	ED HEOLII 10		Detailed Summary Page	X 11a 13	11b 11c 12 14 15 16 17
Any inform	ation copied from such Reports and Sta	tements may	not be sold or used by any perso		
or for com	ation copied from such Reports and Sta mercial purposes, other than using the n	ame and add	lress of any political committee to	solicit contributio	ns from such committee.
\	OF COMMITTEE (In Full)				
Plasty	PAC				
/ Full Na	me (Last, First, Middle Initial)				
<b>A.</b> Dr. Dan	, , ,			Date of Red	ceipt
Mailing	Address 959 Cox Rd.			M M /	D D / Y Y Y Y
O:t		04-4-	7in Oada	07	15 2006
City Gasto	nia	State NC	Zip Code 28054		n ID: SA11A1.4749
			20034	Amount of	Each Receipt this Period
	number of contributing political committee.	С			500.00
Name o Self	f Employer	Occupation Physician		1	
Receipt	For:	<u> </u>	Year-to-Date ▼	$\dashv$	
P	rimary General			1	
0	ther (specify) 🔻		500.00		
Full No.	co (Lost First Middle Initial)				
	me (Last, First, Middle Initial) st Normington			Date of Red	ceipt
Mailing	Address 210 Jpm Rd. Ste. 200			M M /	D D / Y Y Y Y
			7' 0 1	0 7	30 2006
City	oura	State PA	Zip Code		n ID: SA11A1.4958
Lewish	-	FA	17837	Amount of	Each Receipt this Period
	number of contributing political committee.	C			500.00
		10			
Self	f Employer	Occupation Physician			
Receipt	For:		Year-to-Date ▼		
	rimary General			1	
o	ther (specify) 🔻		500.00		
E 2.57	A Control Control Market Control				
	me (Last, First, Middle Initial) mas Orcutt			Date of Red	ceipt
	Address 310 23rd Ave. N., Ste 10	00		M M /	D D / Y Y Y Y
	· 		7: 0 1	0 8	13 2006
City <u>Nashv</u>	illo	State TN	Zip Code		n ID: SA11A1.4994
		TIN	37203	Amount of	Each Receipt this Period
federal	number of contributing political committee.	C			200.00
		LOggianation		_	
Self	f Employer	Occupation PHysician			
Receipt	For:	· · · · · · · · · · · · · · · · · · ·	Year-to-Date ▼	$\dashv$	
	rimary General			1	
□ 0	ther (specify)		400.00		
SUBTOTA	AL of Receipts This Page (optional)		<b>.</b>		1200.00
			•		
TOTAL T	his Period (last page this line number or	nly)	<b></b>		

SC	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 41 / 73
ITEMIZED RECEIPTS			or each category of the	(check only one)    X   11a   11b   11c   12
			Detailed Summary Page	13 14 15 16 17
Ang or f	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and ado	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$\rangle$	PlastyPAC			
_	Full Name (Last, First, Middle Initial) Dr. John Osborn			Date of Receipt
	Mailing Address 95 Scripps Dr.			08 / 04 / 2006
	City	State	Zip Code	Transaction ID: SA11A1.4965
	Sacramento Dr.	CA	95825	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Self	Occupation Physician		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		300.00	
	Full Name (Last, First, Middle Initial) Dr. George Peltier			Date of Receipt
	Mailing Address 6545 France Ave. South	, Ste. 333		08 03 7 2006
	City	State	Zip Code	Transaction ID: SA11A1.4939
	Edina	MN	55435	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Self	Occupation		
		Physician		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	1
	Other (specify) ▼		500.00	
	Full Name (Last, First, Middle Initial) Dr. Linda Phillips			Date of Receipt
	Mailing Address 6.124 mccullough Bldg. 301 University Blvd.			09 / 25 / Y Y Y Y Y Y
	Calcastan	State	Zip Code	Transaction ID: SA11A1.5155
	Galveston	TX	77555	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Self	Occupation Physician		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		1000.00	
sı	JBTOTAL of Receipts This Page (optional)			1800.00
			<u> </u>	
TC	OTAL This Period (last page this line number on	ıly)	<b>)</b>	

PAGE 42/73 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) **PlastyPAC** Full Name (Last, First, Middle Initial) Date of Receipt A. Dr. George Picha Mailing Address 5005 Rockside Rd.,, Ste. 640 07 2006 09 City State Zip Code Transaction ID: SA11A1.4633 **Independence** OH 44131 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer Self Occupation Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Dr. Alon Pnini Date of Receipt Mailing Address 1125 Beverly Dr., Ste. 525 28 2006 City State Zip Code Transaction ID: SA11A1.4913 Los Angeles CA 90035 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Self Occupation Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. Mr. Paul Pomerantz Date of Receipt Mailing Address 444 E. Algonquin Rd. 09 13 2006 Citv State Zip Code Transaction ID: SA11A1.5131 Arlington Heights Ш 60005 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer Self Occupation Physicain Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1750.00 SUBTOTAL of Receipts This Page (optional) .....

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 73 (check only one)  X 11a 11b 11c 12				
			, ,	13 14 15 16 17				
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.				
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) PlastyPAC							
	Full Name (Last, First, Middle Initial) Dr. Suri Ponamgi Mailing Address 1101 Palisade Ave.			Date of Receipt				
		01-1-	7'- 0-1-	08 22 2006				
	City Fort Lee	State NJ	Zip Code 07024	Transaction ID: SA11A1.5052  Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		300.00				
	Name of Employer Self	Occupation Physician						
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00					
3.	Full Name (Last, First, Middle Initial) Dr. Mary Powers			Date of Receipt				
	Mailing Address 2888 Long Beach Blvd.,	07 24 2006						
	City	State	Zip Code	Transaction ID: SA11A1.4911				
	Long Beach	CA	90806	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		500.00				
	Name of Employer Self	Occupation Physician						
	Receipt For:		e Year-to-Date ▼					
	Primary General Other (specify) ▼		500.00					
	Full Name (Last, First, Middle Initial) Dr. Gregory Rauscher			Date of Receipt				
	Mailing Address 20 Prospect Ave., Ste. 6	600		07				
	City	State	Zip Code	Transaction ID: SA11A1.4900				
	Hackensack	NJ	07601	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		1000.00				
	Name of Employer Self	Occupation Physician						
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1000.00					
SI	SUBTOTAL of Receipts This Page (optional)							
TO	OTAL This Period (last page this line number or	nly)	<b>_</b>					

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 44 / 73		
ITEMIZED RECEIPTS			or each category of the	(check only one)	🗖
THE MILES REGENT TO			Detailed Summary Page	X 11a 11b 13	11c   12 15   16   17
Δr	ny information copied from such Reports and Si	, not be sold or used by any perso			
or	for commercial purposes, other than using the	solicit contributions from su	ch committee.		
	NAME OF COMMITTEE (In Full)				
$\rangle$	PlastyPAC				
Α.	Full Name (Last, First, Middle Initial) Dr. Debra Ann Reilly			Date of Receipt	
	Mailing Address 983335 Nebraska Med			07 06	2006
	City	State	Zip Code	Transaction ID: SA1	
	Omaha	NE	68198	Amount of Each Rece	ipt this Period
	FEC ID number of contributing federal political committee.	C			250.00
	Name of Employer Self	Occupation Physician			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General		250.00	1	
	Other (specify) ▼		250.00		
В.	Full Name (Last, First, Middle Initial) Dr. Debra Ann Reilly			Date of Receipt	
	Mailing Address 983335 Nebraska Med			07 / 23	2006
	City	State	Zip Code	Transaction ID: SA1	
	Omaha	NE	68198	Amount of Each Rece	ipt this Period
	FEC ID number of contributing federal political committee.	C			250.00
	Name of Employer Self	Occupation		1	
		Physiciar		_	
	Receipt For:  Primary  General	Aggregate	e Year-to-Date ▼	,	
	Other (specify) ▼		500.00		
<b>C</b> .	Full Name (Last, First, Middle Initial) Dr. Howard Rosenberg			Date of Receipt	
	Mailing Address 2204 Grant Rd., Ste. 2	01		0 7	2006
	City	State	Zip Code	Transaction ID: SA1	1A1.4885
	Mountain View	CA	94040	Amount of Each Rece	ipt this Period
	FEC ID number of contributing federal political committee.	C			300.00
	Name of Employer Self	Occupation Physician			
Primary General		Aggregate	e Year-to-Date ▼		
			300.00	1	
_	Other (specify) ▼		000.00		
s	UBTOTAL of Receipts This Page (optional)				800.00
$\vdash$			<u> </u>		
T	OTAL This Period (last page this line number	only)	<b>&gt;</b>		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 45 / 73 (check only one)
•			Detailed Summary Page	X   11a     11b     11c     12     15     16     17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the r	itements may ame and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) PlastyPAC			
۹.	Full Name (Last, First, Middle Initial) Dr. Malcolm Roth			Date of Receipt
	Mailing Address 925 49th St.			09 08 2006
	City Brooklyn	State NY	Zip Code 11219	Transaction ID: SA11A1.5110
	FEC ID number of contributing federal political committee.	C	11213	Amount of Each Receipt this Period  1000.00
	Name of Employer Self	Occupation Physician		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
3.	Full Name (Last, First, Middle Initial) Dr. Leonard Roudner			Date of Receipt
	Mailing Address 550 Biltmore Way, Ste.	07 30 7 2006		
	City	State	Zip Code	Transaction ID: SA11A1.4871
	Coral Gables  FEC ID number of contributing federal political committee.	FL C	33134	Amount of Each Receipt this Period  500.00
	Name of Employer Self	Occupation Physician		7
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
<u> </u>	Full Name (Last, First, Middle Initial) Dr. Ross Rudolph			Date of Receipt
	Mailing Address 10666 N. Torrey Pines F	Rd.		09 13 7 2006
	City La Jolla	State CA	Zip Code 92037	Transaction ID: SA11A1.5136  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	32007	500.00
	Name of Employer Self	Occupation Physician	1	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00	
SI	UBTOTAL of Receipts This Page (optional)			2000.00
T	OTAL This Period (last page this line number o	nly)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 46 / 73		
ITEMIZED RECEIPTS			or each category of the	(check only one)	🗖
TIEMIZED TIEGEN 10			Detailed Summary Page	X 11a 11b 1	11c   12 15   16   17
Δ.	ny information copied from such Reports and Sta	otomonto mo	reat he cold or wood by any norce		
or	for commercial purposes, other than using the r	solicit contributions from s	uch committee.		
	NAME OF COMMITTEE (In Full)				
$  \rangle$	PlastyPAC				
$\angle$					
^	Full Name (Last, First, Middle Initial)			Data of Pagaint	
Α.	Dr. C. Cayce Rumsey  Mailing Address 209 Ponte Vedra Park [	)r		Date of Receipt	/ Y
	ZOS FOILLE VEGIA FAIR L	Л.		0 8 0 5	2006
	City	State	Zip Code	Transaction ID: SA	11A1.4948
	Ponte Vedra Beach	FL	32082	Amount of Each Rec	eipt this Period
	FEC ID number of contributing	С			250.00
	federal political committee.				200.00
	Name of Employer	Occupation	า		
	Self	Physician	ı		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General		250.00		
	Other (specify)		250.00		
_	Full Name (Last, First, Middle Initial)				
В.	Dr. Frank Ryan			Date of Receipt	
	Mailing Address 9675 Brighton Way, Ste	e. 340		M M / D D	/ <b>Y Y Y Y</b>
	-			07 06	2006
	City	State	Zip Code	Transaction ID: SA	
	Beverly Hills	CA	90210	Amount of Each Rec	eipt this Period
	FEC ID number of contributing federal political committee.	C			250.00
	•				
	Name of Employer Self	Occupation			
		Physician			
	Receipt For:  Primary  General	Aggregate	Year-to-Date ▼		
	Other (specify)		250.00		
			0 0 0 0 0 0 0		
_	Full Name (Last, First, Middle Initial)				
C.	Dr. Gary Salomon			Date of Receipt	
	Mailing Address 1199 Bust St., Ste. 640			07 23	2006
	City	State	Zip Code	Transaction ID: SA	
	San Francisco	CA	94109	Amount of Each Rec	
	FEC ID number of contributing				<del> </del>
	federal political committee.				250.00
			า	$\dashv$	
Self Physi		Occupation Physician			
		<u> </u>	e Year-to-Date ▼		
			050.00		
	Other (specify)	0 0	250.00		
_			750.00		
	UBTOTAL of Receipts This Page (optional)		······		
+	OTAL This Period (last page this line number o	nlv)			
	Title Tillo I ollog (last page tills lille Hallibel o	· · · <b>y</b> / · · · · · · · · · · · · · · · · · ·	······································		

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 47 / 73		
•		Use separate schedule(s) or each category of the		(check only one)		
ITEMIZED RECEIPTS		Detailed Summary Page		X 11a 11b 11c 12		
				13 14 15 16 17		
Ar	ny information copied from such Reports and Sta	tements may	not be sold or used by any person	on for the purpose of soliciting contributions		
or	for commercial purposes, other than using the n	ame and add	lress of any political committee to	solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)					
$ \rangle$	PlastyPAC					
$\angle$						
Α.	Full Name (Last, First, Middle Initial) Dr. Antonio Santin			Data of Respirat		
Α.				Date of Receipt		
	Mailing Address 1600 9th St. S			09 06 2006		
	City	State	Zip Code	Transaction ID: SA11A1.5115		
	Great Falls	MT	59405	Amount of Each Receipt this Period		
	FEC ID number of contributing					
	federal political committee.	C		375.00		
	Name of Employer Self	Occupation				
	5	Physician				
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General Other (specify) ▼	' '	500.00			
	Other (specify)	0 0	0 0 0 0 0 0 0	1		
	Full Name (Last, First, Middle Initial)					
В.	, , ,			Date of Receipt		
	Mailing Address 114 Coventry Ln.			M M / D D / Y Y Y Y		
				09 11 2006		
	City	State	Zip Code	Transaction ID: SA11A1.5127		
	Whomissing	PA	19610	Amount of Each Receipt this Period		
	FEC ID number of contributing			500.00		
	federal political committee.	C		300.00		
	Name of Employer	Occupation	1	-		
	Self	Physician				
	Receipt For:		Year-to-Date ▼			
	Primary General	00 0		1		
	Other (specify) ▼	1	500.00			
_	Full Name (Last, First, Middle Initial)	·		Pate of Booking		
C.	Dr. Gerald Schneider			Date of Receipt		
	Mailing Address 10666 N. Torrey Pines F	Rd.		08 03 2006		
	City	State	Zip Code	Transaction ID: SA11A1.4937		
	<u>La Jola</u>	CA	92037	Amount of Each Receipt this Period		
			0200.			
	FEC ID number of contributing federal political committee.			300.00		
	·					
	Name of Employer Self	Occupation				
		Physician		-		
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General Other (specify) ▼		300.00			
	Other (Speedily) \	0 0	0 0 0 0 0 0 0	1		
,	UBTOTAL of Receipts This Page (optional)			1175.00		
$\vdash$	ODITIAL OF NECERPLS THIS Page (OPHORIAL)					
1						

## S

IT	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS  y information copied from such Reports and Sta	atements may	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 48 / 73 (check only one)    X
or	for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.
$\rangle$	NAME OF COMMITTEE (In Full) PlastyPAC			
A.	Full Name (Last, First, Middle Initial) Dr. Gerald Schneider			Date of Receipt
	Mailing Address 10666 N. Torrey Pines F	Rd.		08 26 2006
	City La Jola	State CA	Zip Code 92037	Transaction ID: SA11A1.5079  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Self	Occupation Physician		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00	
В.	Full Name (Last, First, Middle Initial) Dr. Petra Schneider-Redden			Date of Receipt
	Mailing Address 4 Medical Blvd. Hattiesburg Clinic			08 / 03 / 4 2006
	City	State	Zip Code	Transaction ID: SA11A1.4960
	Hattiesburg  FEC ID number of contributing federal political committee.	MS C	39401	Amount of Each Receipt this Period  1000.00
	Name of Employer Self	Occupation Physician		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
<u> </u>	Full Name (Last, First, Middle Initial) Dr. Steven Schuster			Date of Receipt
	Mailing Address 1905 Clinton Moore Rd.			07 09 7 2006
	City	State	Zip Code	Transaction ID: SA11A1.4610
	Boca Raton	FL	33496	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Self	Occupation		
	Receipt For:	Physician	n Year-to-Date ▼	-
	Primary General	, iggregate		1
	Other (specify) ▼	0 0	500.00	
s	UBTOTAL of Receipts This Page (optional)			1800.00

TOTAL This Period (last page this line number only) ......

SCHEDULE A (FEC Form 3X)		Llas seperate sebadula(s)	FOR LINE NUMBER: PAGE 49 / 73	
ITEMIZED RECEIPTS		or each category of the	(check only one)	
••	LIMIZED NEOEM 13		Detailed Summary Page	X   11a     11b     11c     12     15     16     17
Δr	ny information copied from such Reports and State	mente may	y not be sold or used by any nerso	
or	for commercial purposes, other than using the nan	ne and add	dress of any political committee to	solicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full)			
$  \rangle$	PlastyPAC			
$\angle$				
Α.	Full Name (Last, First, Middle Initial) Dr. Paul Scioscia			Date of Receipt
Α.	Mailing Address 209 Ponte Vedra Par, Dr.			M M / D D / Y Y Y Y
	209 Toffice Vedra Fai, Dr.			08 04 2006
	City	State	Zip Code	Transaction ID: SA11A1.4967
	Ponte Vedra Beach	FL	32082	Amount of Each Receipt this Period
	FEC ID number of contributing			250.00
	federal political committee.	C		230.00
	Name of Employer	Occupation	1	
		Physiciar	1	
		Aggregate	Year-to-Date ▼	
	Primary General		250.00	1
	Other (specify)			
_	Full Name (Last, First, Middle Initial)			
В.	Dr. Alan Serure			Date of Receipt
	Mailing Address 7300 S. W. 62nd Place, S	te. 200		07 03 2006
	City	State	Zip Code	Transaction ID: SA11A1.4576
	South Miami	FL	33143	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		500.00
	Name of Employer	Occupation		_
	Colf	Occupatior Physiciar		
			Year-to-Date ▼	
	Primary General	r iggi ogulo		1
	Other (specify) ▼		500.00	
_	Full Name (Last, First, Middle Initial)			Data of Bossint
C.	Dr. Nina Shaikh-Naidu  Mailing Address 160 E. 72nd St.			Date of Receipt
	Mailing Address 160 E. 72nd St.			08 26 2006
	City	State	Zip Code	Transaction ID: SA11A1.5070
	New York	NY	10021	Amount of Each Receipt this Period
	FEC ID number of contributing	<u></u>		300.00
	federal political committee.	C		300.00
	Name of Employer	Occupation	1	7
Self PHysicia				
		Year-to-Date ▼		
			300.00	1
	Other (specify) ▼	0 0	300.00	
	<u>l</u>			
	IIPTOTAL of Possints This Boss (entirest)			1050.00
L	UBTOTAL of Receipts This Page (optional)			-
т	OTAL This Period (last page this line number only	')	<b>)</b>	
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	,	•	

S	SCHEDULE A (FEC Form 3X)		11	FOR LINE NUMBER: PAGE 50 / 73					
	•		Use separate schedule(s) or each category of the	(check only one)					
Ш	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12					
				13 14 15 16 17					
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may	not be sold or used by any person	on for the purpose of soliciting contributions					
Oi		lame and add	aress or any political committee to	Solicit Contributions from Such Confinitee.					
	NAME OF COMMITTEE (In Full)								
/	PlastyPAC								
<u>/</u>	Full Name (Last, First, Middle Initial)								
A.	Dr. Joel Shanklin			Date of Receipt					
	Mailing Address 900 Mohawk St., Ste. A			M M / D D / Y Y Y Y					
	Cit.	01-1-	7:- Oada	08 02 2006					
	City	State	Zip Code	Transaction ID: SA11A1.4930					
	Savannah	GA	31419	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		500.00					
	rederai politicai committee.								
	Name of Employer Self	Occupation							
		Physiciar							
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General Other (specify) ▼	' '	500.00						
	Other (specify)	0 0	1 1 1 1 1 1 1						
_	Full Name (Last, First, Middle Initial)								
В.	,			Date of Receipt					
	Mailing Address 1940 Optiz Blvd.			M M / D D / Y Y Y Y					
	011	01-1-	7'- 0-4-	07 09 2006					
	City	State	Zip Code	Transaction ID: SA11A1.4660					
	Woodbridge	VA	22191	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		500.00					
	rederal political committee.								
	Name of Employer Self	Occupation							
		Physiciar							
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General Other (specify) ▼	' '	500.00						
	Other (specify)	0 0		1					
	Full Name (Last, First, Middle Initial)								
C.	Dr. Carol Shapiro			Date of Receipt					
	Mailing Address 1940 Optiz Blvd.			M M / D D / Y Y Y Y Y					
	City	State	7in Code	07 29 2006					
	City Woodbridge	VA	Zip Code 22191	Transaction ID: SA11A1.4904					
		VA	22191	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		250.00					
	·								
	Name of Employer Self	Occupation							
		Physician							
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General Other (specify) ▼		750.00						
	Strict (openity) \		0 0 0 0 0 0 0	1					
Г									
s	UBTOTAL of Receipts This Page (optional)			1250.00					
$\vdash$				-					

0	COHEDINE A (EEC Form 2V)			FOR LINE NUMBER: PAGE 51 / 73					
	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)					
IT	EMIZED RECEIPTS		or each category of the	X 11a 11b 11c 12					
			Detailed Summary Page						
۸r	ny information copied from such Reports and Sta	ntomonte may	y not be cold or used by any perc						
or	for commercial purposes, other than using the r	name and add	dress of any political committee to	o solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full)								
$  \rangle$	PlastyPAC								
/	FlastyFAO								
<u>/</u>	Full Name (Last, First, Middle Initial)								
A.	Dr. James Sheridan			Date of Receipt					
	Mailing Address 5401 Knoxville Ave., Ste	e. 103		M M / D D / Y Y Y Y					
				07 17 2006					
	City	State	Zip Code	Transaction ID: SA11A1.4723					
	Peoria	IL	61614	Amount of Each Receipt this Period					
	FEC ID number of contributing			050.00					
	federal political committee.	C		250.00					
	Name of Employer Self	Occupation							
		Physiciar							
	Receipt For:	Aggregate	e Year-to-Date ▼						
	Primary General	1	250.00	71					
	Other (specify) ▼	0 0	200.00	1					
R	Full Name (Last, First, Middle Initial) Dr. Kimberly Short			Date of Receipt					
υ.				<u> </u>					
	Mailing Address 8455 Clearvista Place			07 22 2006					
	City	State	Zip Code	Transaction ID: SA11A1.4829					
	Indianapolis	IN	46256	Amount of Each Receipt this Period					
	•	118	40230	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		500.00					
	Name of Employer Self	Occupation	า						
	Sell	Physiciar	า						
	Receipt For:	Aggregate	e Year-to-Date ▼						
	Primary General		500.00	7					
	Other (specify)	0 0	500.00						
_	Full Name (Last, First, Middle Initial) Dr. Charles Slack			Date of Receipt					
U.		01 Cto 070	<u> </u>	M M / D D / Y Y Y Y					
	Mailing Address 1105 Central Expresswa	ay, Sie. 370	,	07 05 2006					
	City	State	Zip Code	Transaction ID: SA11A1.4582					
	Allen	TN	75013	Amount of Each Receipt this Period					
	FEC ID number of contributing								
	federal political committee.			250.00					
	Name of Employer Self	Occupation							
		Physiciar							
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General		1250.00	11					
	Other (specify) ▼		1230.00	1					
_									
				1000.00					
S	UBTOTAL of Receipts This Page (optional)			1000.00					
$\vdash$				-					

IT	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 52 / 73 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
or	y information copied from such Reports and Stat- for commercial purposes, other than using the na	ements may me and add	ress of any political committee to	solicit contributions from such committee.
$\rangle$	NAME OF COMMITTEE (In Full) PlastyPAC			
۹.	Full Name (Last, First, Middle Initial) Dr. John Smith			Date of Receipt
	Mailing Address 3612 Lake Ave.,			07 17 2006
	City	State	Zip Code	Transaction ID: SA11A1.4767
	Wilmette	IL	60091	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Self	Occupation Physician		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		300.00	
₹	Full Name (Last, First, Middle Initial) Dr. Rick Smith			Date of Receipt
<b>.</b>	Mailing Address 2900 Hannah Blvd., Ste.	102		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.4777
	East Lansing	MI	48823	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Self	Occupation		7
		Physician		4
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	
<b>)</b> .	Full Name (Last, First, Middle Initial) Dr. Bethanne Snodgrass			Date of Receipt
	Mailing Address 5300 Harroun Rd., Ste. 2	16		07 07 2006
	City	State	Zip Code	Transaction ID: SA11A1.4593
	Sylvania	OH	43560	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Self	Occupation Physician	1	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
s	UBTOTAL of Receipts This Page (optional)			1100.00
	,			

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMI	BER: PAGE 53/73
	EMIZED RECEIPTS		or each category of the	(check only one)	45 🖂 44 . 🖂 40
•			Detailed Summary Page	X 11a   1	1b 11c 12 4 15 16 17
Ar	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any perso		
or		ame and add	dress of any political committee to	solicit contributions	from such committee.
$\rangle$	NAME OF COMMITTEE (In Full) PlastyPAC				
۹.	Full Name (Last, First, Middle Initial) Dr. Lisa Sowder			Date of Recei	pt
	Mailing Address 901 Boren Ave., Ste. 165			0 7	11 2006
	City	State	Zip Code		D: SA11A1.4685
	Seattle	WA	98104	Amount of Ea	ch Receipt this Period
	FEC ID number of contributing federal political committee.	C			1000.00
	Name of Employer Self	Occupation Physician			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼		1000.00		
3.	Full Name (Last, First, Middle Initial) Dr. Scott Spear			Date of Recei	pt
	Mailing Address 3800 Reservoir Rd. NW			0 9	03 / 2006
	City	State	Zip Code	Transaction I	<b>D</b> : SA11A1.5089
	Washington	DC	20007	Amount of Ea	ch Receipt this Period
	FEC ID number of contributing federal political committee.	С			250.00
	Name of Employer Self	Occupation		7	
		Physician		_	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼		
	Other (specify)	0 0	250.00		
<b>-</b> ).	Full Name (Last, First, Middle Initial) Dr. Leslie Stevens			Date of Recei	ipt
	Mailing Address 201 S. Lasky Dr.			0.8	03 / 2006
	City	State	Zip Code		<b>D</b> : SA11A1.4935
	Beverly Hills	CA	90212	Amount of Ea	ch Receipt this Period
	FEC ID number of contributing federal political committee.	C			300.00
	Name of Employer Self	Occupation Physician			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼		300.00		
s	UBTOTAL of Receipts This Page (optional)				1550.00
_	OTAL This Davied (leakure at this the case )	I. A			
- 1	OTAL This Period (last page this line number on	ıy)	<b>&gt;</b>		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	or ea	separate schedule(s) ch category of the illed Summary Page	FOR LINE NUMBER: PAGE 54 / 73 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may not be the name and address of	sold or used by any perso any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) PlastyPAC			
Full Name (Last, First, Middle Initial) Dr. William Strinden			Date of Receipt
Mailing Address 116 Christie Dr.			07 12 2006
City		Code	Transaction ID: SA11A1.4678
Lufkin  FEC ID number of contributing federal political committee.	TX 75	904	Amount of Each Receipt this Period 500.00
Name of Employer Self	Occupation Physician		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to	-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Patrick Sullivan Mailing Address 235 Plain St., Ste. 5	02		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip	Code	Transaction ID: SA11A1.4587
Providence`  FEC ID number of contributing federal political committee.	RI 02	905	Amount of Each Receipt this Period 250.00
Name of Employer Self	Occupation Physician		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to	-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Merton Suzuki			Date of Receipt
Mailing Address 12630 monte Vista	Rd., Ste. 108		08 / 03 / 4 4 4 4
City Poway	•	Code 064	Transaction ID: SA11A1.4971
FEC ID number of contributing federal political committee.	C	1 1 1	Amount of Each Receipt this Period  250.00
Name of Employer Self	Occupation Physician		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to	-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional	)		1000.00

S	CHEDULE A (FEC Form 3X)		Llea coparata cabadula(c)	FOR LINE NUMBER: PAGE 55 / 73					
	EMIZED RECEIPTS	Use separate schedule(s) or each category of the		(check only one)					
•••	LIVIIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12					
_	., ., ., ., ., ., ., ., ., ., ., ., ., .			13 14 15 16 17					
or	y information copied from such Reports and Sta for commercial purposes, other than using the i	atements may name and add	r not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.					
$\setminus$	NAME OF COMMITTEE (In Full)								
	PlastyPAC								
A.	Full Name (Last, First, Middle Initial) Dr. Edward Truppman			Date of Receipt					
	Mailing Address PO Box 630188			07 15 2006					
	City	State	Zip Code	Transaction ID: SA11A1.4769					
	Miami	<u>FL</u>	33163	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		300.00					
	Name of Employer Self	Occupation Physician							
	Receipt For:		Year-to-Date ▼						
	Primary General	-	200.00	7					
	Other (specify)	0 0	300.00	_					
В.	Full Name (Last, First, Middle Initial) Dr. Edward Truppman			Date of Receipt					
	Mailing Address PO Box 630188			07 30 7 2006					
	City	State	Zip Code	Transaction ID: SA11A1.4884					
	Miami	<u>FL</u>	33163	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		300.00					
	Name of Employer Self	Occupation Physician							
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General		600.00	7					
	Other (specify)	0 0	000.00						
C.	Full Name (Last, First, Middle Initial)  Dr. David Turner			Date of Receipt					
	Mailing Address 711 West 38th St., Ste.			09 14 2006					
	City	State	Zip Code	Transaction ID: SA11A1.5144					
	Austin	TX	78705	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		300.00					
	Name of Employer Self	Occupation Physician							
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General Other (specify) ▼	0 0	300.00						
s	UBTOTAL of Receipts This Page (optional)			900.00					
			<u> </u>	_					
IT	OTAL This Period (last page this line number of	nlv)	i						

	HEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 56 / 73 (check only one)  X 11a 11b 11c 12
Any	rinformation copied from such Reports and Sta	tements may	not be sold or used by any perso	n for the purpose of soliciting contributions
1	NAME OF COMMITTEE (In Full) PlastyPAC	arre arra ade	isos or ary political committee to	Solidit Contributions from Sacri Committee.
•	Full Name (Last, First, Middle Initial) Dr. Benjamin Van Raalte  Mailing Address 4334 E. 53rd St.  City  Davenport  FEC ID number of contributing rederal political committee.  Name of Employer Self  Receipt For:  Primary  General	State IA  C  Occupation Physician Aggregate		Date of Receipt  M M O B O O O O O O O O O O O O O O O O
<b>3.</b> _	Other (specify) ▼  Full Name (Last, First, Middle Initial)  Dr. Oscar Vargas  Mailing Address Mendez Vigo 165 Este.	0 0	1000.00	Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
<u> </u> 	City  Mayaguez  FEC ID number of contributing	State PR	Zip Code 00680	Transaction ID: SA11A1.4928  Amount of Each Receipt this Period  250.00
1	Name of Employer Self  Receipt For: Primary Other (specify)	Occupation Physician		
<b>).</b> _	Full Name (Last, First, Middle Initial) Dr. Simeon Wall Mailing Address 1400 E. Bert Kouns, Ste	. 106		Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
<u>s</u> F	City Shreveport FEC ID number of contributing rederal political committee.  Name of Employer Self	State LA C		Transaction ID: SA11A1.5060  Amount of Each Receipt this Period  1000.00
_	Receipt For:  Primary General  Other (specify) ▼	Physiciar Aggregate	Year-to-Date ▼ 1000.00	
SU	BTOTAL of Receipts This Page (optional)		<b>)</b>	2250.00
то	TAL This Period (last page this line number or	nly)		

PAGE 57 / 73 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) **PlastyPAC** Full Name (Last, First, Middle Initial) Date of Receipt A. Dr. Stewart Wang Mailing Address 1234 Garfield Ave., Ste. 203 07 3 0 2006 City State Zip Code Transaction ID: SA11A1.4902 Alhambra CA 91801 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer Self Occupation PHysician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Paul Weiss Date of Receipt Mailing Address 1049 Fifth Ave., Ste. 2D 0 8 14 2006 City State Zip Code Transaction ID: SA11A1.4981 New York NY 10028 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Self Occupation Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. Dr. Clint Welsh Date of Receipt Mailing Address 2930 Hillrise, Ste. 6 15 2006 City Zip Code State Transaction ID: SA11A1.4691 Las Cruces NM 88011 Amount of Each Receipt this Period FEC ID number of contributing C 300.00 federal political committee. Name of Employer Self Occupation Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 1050.00 SUBTOTAL of Receipts This Page (optional) .....

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER:	PAGE 58 / 73
ITEMIZED RECEIPTS			or each category of the	(check only one)  X 11a 11b	] 11c
			Detailed Summary Page	13 14	15 16 17
Ar	ry information copied from such Reports and Sta for commercial purposes, other than using the n	atements may	not be sold or used by any person	on for the purpose of solicit	ing contributions
V OI	NAME OF COMMITTEE (In Full)	iame and add	aress or arry political committee to	Solicit Contributions from s	such committee.
$\rangle$	PlastyPAC				
^	Full Name (Last, First, Middle Initial)			Date of Benefit	
Α.	Dr. Steven White  Mailing Address 1275 21st Ave. North			Date of Receipt	/ <b>Y Y Y Y Y</b>
				07 16	2006
	City	State	Zip Code	Transaction ID: SA	
	Myrtle Beach	SC	29577	Amount of Each Red	ceipt this Period
	FEC ID number of contributing federal political committee.	C			500.00
	Name of Employer Self	Occupation Physician			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼		800.00		
— В	Full Name (Last, First, Middle Initial) Dr. Gary Wingate			Date of Receipt	
-	Mailing Address 460 Creamery Way, Ste	e. 110		M M / D D D 0 7 1 1	2006
	City	State	Zip Code	Transaction ID: SA	\11A1.4687
	Exton	PA	19341	Amount of Each Red	ceipt this Period
	FEC ID number of contributing federal political committee.	С			300.00
	Name of Employer Self	Occupation Physician			
	Receipt For:		Year-to-Date ▼		
	Primary General		300.00	1	
	Other (specify)		000.00		
C.	Full Name (Last, First, Middle Initial) Dr. Curtis Wong			Date of Receipt	
	Mailing Address 2439 Sonoma St., Ste.	101		M M / D D	
	City	Ctata	7in Code	07 12	2006
	City Redding	State CA	Zip Code 96001	Transaction ID: SA  Amount of Each Rec	
	FEC ID number of contributing			7 illionit of Edon Ho	<del> </del>
	federal political committee.	C			500.00
	Name of Employer Self	Occupation Physician			
	Receipt For:	<u> </u>	Year-to-Date ▼		
	Primary General Other (specify) ▼		500.00		
S	UBTOTAL of Receipts This Page (optional)				1300.00
$\vdash$					
т	OTAL This Period (last page this line number of				

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 59 / 73 (check only one)					
•••	LIMIZED RECEIF 13		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
Ar	ny information copied from such Reports and St	atements may	not be sold or used by any pers						
or	for commercial purposes, other than using the	name and add	dress of any political committee to	o solicit contributions from such committee.					
$\setminus$	NAME OF COMMITTEE (In Full)								
	PlastyPAC								
Α.	Full Name (Last, First, Middle Initial) Dr. William Wyatt			Date of Receipt					
	Mailing Address 2232 Dell Range Blvd.,	Ste. 206		07 11 2006					
	City	State	Zip Code	Transaction ID: SA11A1.4666					
	Cheyenne	WY	82009	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		500.00					
	Name of Employer Self	Occupation							
		Physicia		_					
	Receipt For:  Primary General	Aggregate	e Year-to-Date ▼	7					
	Other (specify) ▼	0 0	500.00						
В.	Full Name (Last, First, Middle Initial) Dr. Leonard Yu			Date of Receipt					
	Mailing Address 33 Iono Ave., Ste. 250			07 09 2006					
	City	State	Zip Code	Transaction ID: SA11A1.4627					
	<u>Kahului</u>	HI	96732	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		1000.00					
	Name of Employer Self	Occupation							
	Receipt For:	Physician	n e Year-to-Date ▼	_					
	Primary General Other (specify) ▼	Aggregate	1000.00						
_	Full Name (Last, First, Middle Initial)			5. (5. )					
C.	Dr. Paul Zweibel  Mailing Address 206 West County Line	Rd Sto 21	10	Date of Receipt					
	200 West County Line	110., 516. 21		07 14 2006					
	City	State	Zip Code	Transaction ID: SA11A1.4741					
	Littleton	CO	80129	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		300.00					
	Name of Employer Self	Occupation Physician							
	Receipt For:		e Year-to-Date ▼						
	Primary General		300.00	7					
	Other (specify) ▼		300.00	1					
	LIPTOTAL of December This Design (anti-con)			1800.00					
$\vdash$	UBTOTAL of Receipts This Page (optional)								
I _				71733.00					

	CHEDOLL B (I LOI OIII 3X)		erate schedule(s)			OR LINE	= NUMBI lv one)	=R:			PAGI	= 60 /	/3
IT	EMIZED DISBURSEMENTS		category of the Summary Page		Ė	21b 27	22 28a	Х	23 28b	$\mathbf{\Box}$	24 28c	25 29	26 30b
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam												ns
Or	NAME OF COMMITTEE (In Full)	e and addres	ss of any politica	COIII	1111	illee to s	Olicit Corii	ribui	ions ir	om st	ich con	irriittee	
$\rangle$	PlastyPAC												
Α.	Full Name (Last, First, Middle Initial)						1			_	23.479	0	
۸.	BIG TENT PAC;THE						M	М	isburs			YY	Υ
	Mailing Address 3700 Massachusetts Ave	enue NW 1	108				0 9			2		žoŏ	6
	City Washington	State DC	Zip Code 20016				Amo	unt c	f Each	Disb	urseme	nt this	Period
	Purpose of Disbursement	DC	20010		_							5000	00
				L									
	Candidate Name					gory/ pe							
	Office Sought: House Disburse Senate	ement For: Primary	2006 X General										
	President	Other (spe											
	State: District:												
В.	Full Name (Last, First, Middle Initial) BLUEGRASS COMMITTEE						1		ion ID	_	3.452	2	
							M	_		9		ž 0 ŏ	Y
	Mailing Address 400 North Capitol Street #585	NW					0 7			9		200	6
	City Washington	State DC	Zip Code 20001				Amo	unt c	f Each	Disb	urseme	nt this	Period
	Purpose of Disbursement	<u> </u>	20001		-	-						2500	00
	·			L									
	Candidate Name					gory/ pe							
		ement For:	2006			-							
	Senate President	Primary Other (spe	X General										
	State: District:	Other (ope	5011 <b>y</b> ) •										
C.	Full Name (Last, First, Middle Initial) BOB CORKER FOR SENATE								ion ID		23.481	3	
		. =					M 0 9	М		2		ž 0 ŏ	e Y
	Mailing Address 518 GEORGIA AVE 2NI	FLOOR					0 3					200	9
	City CHATANOOGA	State TN	Zip Code 37403				Amo	unt c	f Each	Disb	urseme	ent this	Period
	Purpose of Disbursement				v		† L.					5000	00
	Candidate Name				oto	gory/							
	Candidate Name					pe							
	, i	ement For:	2006										
	X Senate President	Primary Other (spe	X General ecify) ▼										
	State: TN District: 00	(-	<b>y</b> , <b>v</b>										
s	UBTOTAL of Disbursements This Page (optional)					•					1:	2500.	00
								-		-	-		
ΙŢ	OTAL This Period (last page this line number only)					▶							

SCILDOLL B (I LCI OIII 3X)	Use seperate schedule(s)	(check on	: NUMBER: lv one)		PAGE	61 / /3	3
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 28a		24 28c	25 29	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full) PlastyPAC	and address of any pointed c	STITILLEGE TO S	Short Contribu		GOIT GOITHI	CG	
Full Name (Last, First, Middle Initial)  A. BOUCHARD FOR US SENATE			Date of D	tion ID: SB2	nt	· V · \	<u> </u>
Mailing Address 4050 WEST MAPLE ROA	AD SUITE 250		0 9	<sup>1</sup> 1 2	2	0 0 6	
,	State Zip Code MI 48301		Amount o	of Each Disk			-
Purpose of Disbursement			L		2	500.00	)
Candidate Name		Category/ Type					
Office Sought:    House   Disburse     X Senate   President     State: MI District: 00	ment For: 2006 Primary X General Other (specify)						
Full Name (Last, First, Middle Initial)  CANTOR FOR CONGRESS				tion ID: SB2 Disbursemer			
Mailing Address P. O. Box 17813			0 9	<sup>1</sup> 1 2	y ž	0 0 6	
Richmond	State Zip Code VA 23226		Amount o	of Each Disk		t this Pe	-
Purpose of Disbursement			L			.500.00	,
Candidate Name		Category/ Type					
Office Sought: X House Disburse Senate President State: VA District: 07	ment For: 2006 Primary X General Other (specify) ▼						
Full Name (Last, First, Middle Initial) CHARLES A GONZALEZ CONGRESSION	AL CAMPAIGN		Date of D	tion ID: SB2 Disbursemer			
Mailing Address PO Box 12612			07	<sup>1</sup> 1 9	2	0 0̈́6	
,	State Zip Code TX 78212		Amount o	of Each Disk	oursemen	t this Pe	eriod
Purpose of Disbursement			L		2	00.00	)
Candidate Name		Category/ Type					
Office Sought:  X House Senate President State: TX District: 20	ment For: 2006 Primary X General Other (specify)						
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>			7(	00.00	
TOTAL This Period (last page this line number only)							

SCILDOLL B (I LCI OIII 3X)	Use seperate schedule(s)	(check only			PAGE	62 / /	3
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 28a	23 28b	24 28c	25 29	26 30b
Any Information copied from such Reports and Stater or for commercial purposes, other than using the nam							
NAME OF COMMITTEE (In Full) PlastyPAC	e and address of any political oc		ion commodi	.010 110111	34011 0011		
Full Name (Last, First, Middle Initial)  CITIZENS FOR RUSH			Transact Date of D	_		7 2 0 0 6	Υ
Mailing Address P. O. BOX 7292			0.3	12		2000	
City CHICAGO	State Zip Code IL 60680		Amount o	f Each Di	isburseme	nt this P	eriod
Purpose of Disbursement	Г					2000.0	0
Candidate Name		Category/ Type					
Office Sought:    X   House   Disburs     Senate   President     State: IL   District: 01	ement For: 2006 Primary X General Other (specify)						
Full Name (Last, First, Middle Initial)  3. COLE FOR CONGRESS			Transact Date of D			5	
			M M M 0 9	/ D D D	_	Ý 0 Ý 6	Y
Mailing Address P.O. Box 722256			0.9	1 2		2000	
City Norman	State Zip Code OK 73070		Amount o	f Each Di	isburseme	nt this P	eriod
Purpose of Disbursement	Г					2000.0	0
Candidate Name		Category/ Type					
Office Sought: X House Disburs Senate President State: OK District: 04	ement For: 2006 Primary X General Other (specify)						
Full Name (Last, First, Middle Initial)			Transact	ion ID: S	B23.451:	 ર	
CONGRESSIONAL MAJORITY COMMIT	EE		Date of D	isbursem	ent		
Mailing Address P. O. BOX 746			0 7	1 9 1 9	/ Y	ž 0 ŏ 6	<u> </u>
City Bakersfield	State Zip Code CA 93302		Amount o	f Each Di	isburseme	nt this P	eriod
Purpose of Disbursement	Г	• • •				5000.0	0
Candidate Name		Category/ Type					
Office Sought: House Senate President State: District:	ement For: 2006 Primary X General Other (specify)						
SUBTOTAL of Disbursements This Page (optional)						9000.0	0
TOTAL This Period (last page this line number only							

		Use seperate schedu				R LINE eck only		:K:			PAG	E 63/	/3
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Pa				21b 27	22 28a	X	23 28b	$\square$	24 28c	25 29	26 30b
	y Information copied from such Reports and Stat for commercial purposes, other than using the na												
	NAME OF COMMITTEE (In Full) PlastyPAC	ine and address of any pol	illicai (		1111111	e to son	CII COIII	nbut	10115 11	OIII SI	uch con	iiiiiiiiiiee	
_	Full Name (Last, First, Middle Initial)						Trans	acti	on ID	: SB2	23.478	86	
Α.	ENSIGN FOR SENATE							of D	isburs		-	V	V
	Mailing Address PO BOX 26568						0 9		์1	2	Ľ.	žoŏ	6
	City LAS VEGAS	State Zip Code NV 89126					Amou	ınt o	f Each	n Disb	urseme	ent this	Period
	Purpose of Disbursement	144 00120	T					·				2500	.00
	Candidate Name		$\dashv$	Ca	atego	ory/							
					Туре	)							
	X Senate President	rsement For: 2006 Primary X Gene Other (specify)	eral										
_	State: NV District: 00  Full Name (Last, First, Middle Initial)						T		ID	. CD	20.404		
В.	FRIENDS FOR MIKE MCGAVICK						Date	of D	isburs	emen			
	Mailing Address PO BOX 9247						0 <sup>M</sup> 9	М	/ D	2	/ Y	žoŏ	6 <sup>Y</sup>
	City SEATTLE	State Zip Code WA 98109					Amou	ınt o	f Each	n Disb	urseme	ent this	Period
	Purpose of Disbursement						L.					5000	.00
	Candidate Name				atego Type	-							
	X Senate President	rsement For: 2006 Primary X Gene Other (specify)	eral										
_	State: WA District: 00 Full Name (Last, First, Middle Initial)						Trans	sacti	on ID	: SB2	23.454	3	
C.	FRIENDS OF CLIFF STEARNS								isburs			.,	
	Mailing Address PO BOX 308						0 <sup>M</sup> 7	М	/ D	9	/ Y	žoŏ	6 <sup>*</sup>
	City SILVER SPRINGS	State Zip Code FL 34489					Amou	ınt o	f Each	Disb	urseme	ent this	Period
	Purpose of Disbursement						L.					2500	.00
	Candidate Name				atego Type								
	Office Sought:  X House Senate President State: FL District: 06	rsement For: 2006 Primary X Gene Other (specify)	eral										
	State. I L DISTITUT. UU							_				0000	00
s	UBTOTAL of Disbursements This Page (optional	al)					<u></u>	_			1	0000	ŲÜ
Т	OTAL This Period (last page this line number or	ly)				•							

	Use seperate schedule(s)		heck or	E NONE)	DEN.			AGE	04 / /	3	
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	22 28a	<sub>a</sub> $\nearrow$	23 28b	24 28c		25 29		26 30b
Any Information copied from such Reports and State										5	
or for commercial purposes, other than using the na  NAME OF COMMITTEE (In Full)	me and address of any political c	commi	tee to s	Olicit col	ntribu	tions tro	m such	comr	nittee		
PlastyPAC											
Full Name (Last, First, Middle Initial)				Tra	nsac	tion ID:	SB23.4	519			
FRIENDS OF CONRAD BURNS - 2006					e of E	Disburse		v v	V -	٧	
Mailing Address PO BOX 1596				O O	7	1	9 /	2	0 Ó 6		
City HELENA	State Zip Code MT 59624			Am	ount (	of Each	Disburse	-		-	i
Purpose of Disbursement		,				_		2	2500.0	00	┙
Candidate Name		Cate									
Office Sought: House Disbur	sement For: 2006 Primary X General	- 71									
President State: MT District:	Other (specify)										
Full Name (Last, First, Middle Initial)				Tue		vian ID.	CDOO 4	700			
FRIENDS OF GEORGE ALLEN				Dat	e of D	Disburse				Y	
Mailing Address PO BOX 6859				0	9 "	1	2 /	2	0 Ó 6		
City ARLINGTON	State Zip Code VA 22206			Am	ount (	of Each	Disburse	-			j
Purpose of Disbursement						-		2	2500.0	00	_
Candidate Name	'	Cate									
Office Sought:  House  X Senate  President  Disbur	sement For: 2006 Primary X General Other (specify) ▼										
State: VA District: 00											
Full Name (Last, First, Middle Initial) FRIENDS OF JOE LIEBERMAN						t <b>ion ID:</b> Disburse	SB23.4 ement	788			
Mailing Address PO BOX 231294 STATE HOUSE SQUA				0 <sup>M</sup>	9 <sup>M</sup>	/ <b>1</b>	2 /	ž	0 0 6	Υ	
City STATE HOUSE SQUARE	State Zip Code CT 06123			Am	ount (	of Each	Disburse	emen	t this P	erio	t
Purpose of Disbursement				1 L				. 5	5000.0	00	
Candidate Name		Cateo Typ									
Office Sought:    House   Disbur	sement For: 2006 Primary X General Other (specify)	71									
State. O1 DISTINCT. 00				_						_	_
SUBTOTAL of Disbursements This Page (optional	l)		<b>•</b>					10	0.00	0	
TOTAL This Period (last page this line number on	10				•						٦
TOTAL THIS PERIOD HAST DADE THIS TIME NUMBER ON	VI										100

SCILDOLL B (I LOI OIII 3X)	Use seperate schedule(s)		·OR LIN check or	E NUMBE	:K:		L PA	GE 65	/ /3	
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	_ F	21b 27	22 28a	X 2	3 8b	24 28c	25 29		26 30b
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name										
NAME OF COMMITTEE (In Full) PlastyPAC	o and address of any pointed	5511111		Jonoit COIII	. ioutioi		540110	J. HIRICO		
Full Name (Last, First, Middle Initial)  FRIENDS OF JOHN TANNER					of Disb	n ID: SI ourseme	ent		/ ` Y	
Mailing Address Post Office Box 1994 Post Office Box 1994								žοò		
City Union City	State Zip Code TN 38281			Amou	unt of E	ach Di	sburse	ment thi	-	od
Purpose of Disbursement								200	0.00	Ш
Candidate Name			egory/ vpe							
Office Sought:    X House   Disburs     Senate   President     State: TN District: 08	ement For: 2006 Primary X General Other (specify)									
Full Name (Last, First, Middle Initial)  FRIENDS OF SESSIONS SENATE COMM	MITTEE INC					n ID: Sl ourseme	ent	520		
Mailing Address P O BOX 4278				0 <sup>M</sup> 7	M /	19	/ Y	žοò	6	
City MONTGOMERY	State Zip Code AL 36103			Amou	unt of E	ach Di	sburse	ment thi		od
Purpose of Disbursement				L.			-	2500	0.00	
Candidate Name			egory/ vpe							
X Senate President	ement For: 2006 Primary X General Other (specify)									
State: AL District: 00  Full Name (Last, First, Middle Initial)				Trans	saction	ı ID: Si	R23 4!	551		
GORDON, BARTON JENNINGS				1		urseme	ent		/ Y	
Mailing Address 940 EAST NORTHFIELD				0 7		19		žοĊ		
City MURFREESBORO	State Zip Code TN 37130			Amou	unt of E	ach Di	sburse	ment thi	-	od
Purpose of Disbursement				<u> </u>			-	250	0.00	Ш
Candidate Name			egory/ vpe							
Office Sought:  X House Senate President State: TN District: 06	ement For: 2006 Primary X General Other (specify)									
SUBTOTAL of Disbursements This Page (optional)			. •					7000	0.00	
TOTAL This Period (last page this line number only			<b></b>							

SCILDOLL B (I LOI OIII 3X)	Use seperate schedule(s)	(check only			PAG	E 66 / /	3
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 28a	23 28b	24 28c	25 29	26 30b
Any Information copied from such Reports and Statemor for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full) PlastyPAC	and address or any political of		o.t continuu		. 30011 001		
Full Name (Last, First, Middle Initial) GORDON, BARTON JENNINGS  Mailing Address 940 EAST NORTHFIELD	BOULEVARD		Transact Date of D	_		5 Ž 0 Ŏ 6	Y
	State Zip Code		Amount o	of Each D	isburseme	ent this P	eriod
MÚRFREESBORO	ΓN 37130					2500.0	
Purpose of Disbursement  Candidate Name	[	Category/				2300.0	0
Office Sought:  X House Senate President State: TN District: 06	nent For: 2006 Primary X General Other (specify)	Туре					
Full Name (Last, First, Middle Initial)  HATCH ELECTION COMMITTEE INC			Transact Date of D	isbursem	ent		V
Mailing Address 175 SOUTH WEST TEMP	PLE SUITE 650		07	19		ž 0 0 6	Y
•	State Zip Code JT 84101		Amount o	f Each D	isburseme	ent this P	
Candidate Name		Category/					-
		Type					
Office Sought: House Disburser  X Senate President State: UT District:	ment For: 2006 Primary X General Other (specify) ▼						
Full Name (Last, First, Middle Initial)  HATCH ELECTION COMMITTEE INC			Date of D	isbursem	_		
Mailing Address 175 SOUTH WEST TEMP	PLE SUITE 650		0 9	1 2	?! / Y	ž 0 0 6	Y
	State Zip Code JT 84101		Amount o	of Each D	isburseme		-
Purpose of Disbursement						2500.0	0
Candidate Name		Category/ Type					
Office Sought:    House   Disburser     X Senate   President     State: UT District:	nent For: 2006 Primary X General Other (specify)						
SUBTOTAL of Disbursements This Page (optional)		<u>►</u>				7500.0	0
TOTAL This Period (last page this line number only)							

SCILDOLL B (I LOI OIIII 3X)	Use seperate schedule(s)	(check only	NUMBER:		PAGE	6///	3
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 28a	23 28b	24 28c	25 29	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full) PlastyPAC	and dadress of any political oc				Judit Gott	milloc	
Full Name (Last, First, Middle Initial)  HOYER FOR CONGRESS  Mailing Address 7905 MALCOLM ROAD S	SUITE 102			ion ID: SI		9 2 0 0 6	Y
				(5 15			
	State Zip Code MD 20735		Amount	it Each Di	sburseme		-
Purpose of Disbursement	Γ					2000.0	0
Candidate Name		Category/ Type					
Office Sought:  X House Senate President State: MD District: 05	nent For: 2006 Primary X General Other (specify)						
Full Name (Last, First, Middle Initial)  3. JOHN D. DINGELL FOR CONGRESS COM	MMITTEE		Date of D	isbursem			_
Mailing Address 607 14th Street N.W. Suite 800			09	12	/ Y	ž 0 ŏ 6	Y
Washington	State Zip Code DC 20005		Amount o	f Each Di	sburseme	nt this P	-
Purpose of Disbursement						2000.0	0
Candidate Name		Category/ Type					
Office Sought:  X House Senate President State: MI District: 15	ment For: 2006 Primary X General Other (specify) ▼						
Full Name (Last, First, Middle Initial) JOHNSON FOR CONGRESS COMMITTEE	<u> </u>			ion ID: SI	B23.454 <sup>-</sup> ent	1	
Mailing Address P. O. Box 1986			0 7 M	<sup>1</sup> 19	/ Y	ž 0 ŏ 6	Y
	State Zip Code CT 06050		Amount o	f Each Di	sburseme		-
Purpose of Disbursement	Γ	•				2500.0	0
Candidate Name	l.	Category/ Type					
Office Sought:  X House Senate President State: CT District: 05	nent For: 2006 Primary X General Other (specify)						
SUBTOTAL of Disbursements This Page (optional)		<u></u>				7000.0	0
TOTAL This Period (last page this line number only)							

SCIEDOLL B (I LCI OIIII 3X)	Use seperate schedule(s)	(check only			PAGE	68 / /3	3
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 28a	23 28b	24 28c	25 29	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name							•
NAME OF COMMITTEE (In Full) PlastyPAC	, and address of any political co	minuted to 30	icit contribu	10113 110111	Such com	THREE .	
Full Name (Last, First, Middle Initial)  JOHNSON FOR CONGRESS COMMITTE  Mailing Address P. O. Box 1986	E			ion ID: Si Disbursement		2006	Y
	State Zip Code		Amount	of Each Die	sbursemer	at this D	oriod
New Britain	CT 06050		Amount	or Each Di			-
Purpose of Disbursement	Г	0 0				2500.0	0
Candidate Name		Category/ Type					
Office Sought: X House Disburse Senate President State: CT District: 05	ment For: 2006 Primary X General Other (specify)						
Full Name (Last, First, Middle Initial)					B23.4516	6	
JON KYL FOR U S SENATE			ММ	oisburseme		YYY	Υ
Mailing Address PO BOX 10246			0 7	19		2 0 0 6	
,	State Zip Code AZ 85064		Amount o	of Each Dis	sbursemer	nt this Po	eriod
Purpose of Disbursement	Г		L			2500.0	0
Candidate Name		Category/ Type					
	ment For: 2006 Primary General Other (specify)						
Full Name (Last, First, Middle Initial)			Transact	ion ID: Si	B23.4783	······································	
JON KYL FOR US SENATE			Date of D	isburseme	ent		_
Mailing Address PO BOX 10246			09	<sup>1</sup> 1 2		2 0 0 6	Y
City PHOENIX	State Zip Code AZ 85064		Amount o	of Each Di	sbursemer	nt this P	eriod
Purpose of Disbursement						2500.0	0
Candidate Name		Category/ Type					
Office Sought:    House   Disburse     X Senate   President     State: AZ District: 00	ment For: 2006 Primary X General Other (specify)						
SUBTOTAL of Disbursements This Page (optional)		<b>•</b>			7	<b>'500.0</b>	0
TOTAL This Period (last page this line number only)							

S	CHEDULE B (FEC Form 3X)	Use sene	erate schedule(s)					NUMBE	R:				PAGE	E 69 /	73
IT _	EMIZED DISBURSEMENTS	for each	category of the Summary Page			check 21 27	ьĖ	one) 22 28a	Х	23 28b	F	2 2	4 8c	25 29	26 30b
	y Information copied from such Reports and State for commercial purposes, other than using the nan														
ļ.	NAME OF COMMITTEE (In Full)		33 of arry political	COII		iiiiioo i	0 3011	Oit COITE	ibui	.10113	11011	1 30	511 0011	milloc	
$\rangle$	PlastyPAC														
Α.	Full Name (Last, First, Middle Initial) KEAN, THOMAS H JR							Trans Date			_		3.453	0	
	Mailing Address PO BOX 225							0 <sup>M</sup> 7	М	/ D	1 9	)	Υ	ž 0 ŏ	6 <sup>Y</sup>
	City COLONIA	State NJ	Zip Code 07067					Amou	ınt c	f Eac	h D	isbu	ırseme	nt this	Period
	Purpose of Disbursement			Г			1							2000	.00
	Candidate Name			С		egory/ ype									
	X Senate President	ement For: C Primary Other (spe	2006 General												
	State: NJ District: 00														
В.	Full Name (Last, First, Middle Initial) KEAN, THOMAS H JR							Date	of D	isbur	sem	nent	3.481		
	Mailing Address PO BOX 225							0 <sup>M</sup> 9	М	/ D	1 2	2 /	Υ	žoŏ	6 <sup>Y</sup>
	City COLONIA	State NJ	Zip Code 07067					Amou	ınt c	f Eac	h D	isbu	irseme		Period
	Purpose of Disbursement											_		5000	.00
	Candidate Name			С		egory/	1								
	Office Sought:    House   Disburs     X Senate   President     State: NJ District: 00	ement For: Primary Other (spe	2006  X General ecify)												
— С.	Full Name (Last, First, Middle Initial) KENNEDY, MARK RAYMOND							Trans					3.452	8	
	Mailing Address 11426 COUNTY RD 13	SE							М	/ D			Y	ž o ŏ	6 <sup>Y</sup>
	City WATERTOWN	State MN	Zip Code 55388					Amou	ınt c	f Eac	h D	isbu	ırseme	nt this	Period
	Purpose of Disbursement						7							2000	.00
	Candidate Name			С		egory/									
	Office Sought:  House X Senate President  State: MN District: 00	ement For: Primary Other (spe	2006  X General ecify)		•	•									
<u> </u>	UBTOTAL of Disbursements This Page (optional)						<b>&gt;</b>							9000	00
Г	OTAL This Period (last page this line number only					•	<u>-</u>	一	•	•	•	-	•	-	

SCILDOLL B (I LCI OIIII 3X)	Use seperate schedule(s)	(check only	NUMBER: (one)		PAGE	/0 / /3	3
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 28a	23 28b	24 28c	25 29	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name							•
NAME OF COMMITTEE (In Full) PlastyPAC	and address of any political co	Minimude to SU	ion commout	ions nom s	50011 001111	THREE .	
Full Name (Last, First, Middle Initial)  MICHAEL BURGESS FOR CONGRESS  Mailing Address PO Box 2334				ion ID: SB isburseme	nt	006	Y
	State Zip Code		Amount	f Each Dis	hurcomon	t thic Do	riod
	TX 76202		Amount o	I Lacii Dis			-
Purpose of Disbursement						2500.00	)
Candidate Name		Category/ Type					
Office Sought:  X House Senate President State: TX District: 26	ment For: 2006 Primary X General Other (specify)						
Full Name (Last, First, Middle Initial)  3. PALLONE FOR CONGRESS				i <b>on ID:</b> SB isburseme			
Mailing Address PO BOX 3176			0 9	12	/ Y 2	0 0 6	Y
LÓNG BRANCH	State Zip Code NJ 07740		Amount o	f Each Dis		t this Pe	-
Purpose of Disbursement							9
Candidate Name		Category/ Type					
Office Sought: X House Disburse Senate President State: NJ District: 06	ment For: 2006 Primary X General Other (specify)						
Full Name (Last, First, Middle Initial)				ion ID: SB			
PRICE FOR CONGRESS			M_M	isburseme 1 9		0 0 6	Y
Mailing Address P.O. Box 425			0 7	19		006	
,	State Zip Code GA 30077		Amount o	f Each Dis	bursemen	t this Pe	eriod
Purpose of Disbursement		•			2	2000.00	0
Candidate Name		Category/ Type					
Office Sought:  X House Senate President State: GA District: 06	ment For: 2006 Primary X General Other (specify)						
SUBTOTAL of Disbursements This Page (optional) .		<u> </u>			7	000.00	)
TOTAL This Period (last page this line number only)							

SCIEDOLE B (I LCI OIIII 5X)	Use seperate schedule(s)	(check only			PAGI	= /1//	3
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 28a	23 28b	24 28c	25 29	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full) PlastyPAC	cana address of any pointed ce	Milline to 30	icit contribui		1 30011 0011	minco	
Full Name (Last, First, Middle Initial)  SORENSEN, SHELIA  Mailing Address PO Box 1661			Transact Date of D			9 2 0 0 6	Y
	State Zip Code		Amount o	of Each D	isburseme	ant this P	eriod
Boise	ID 83701		Amount	i Lacii D			-
Purpose of Disbursement VoidMarch 15, 2006 Candidate Name	[	Category/				-2500.0	0
X	ment For: 2006 Primary General Other (specify)	Туре					
Full Name (Last, First, Middle Initial)  STEELE FOR MARYLAND INC			Date of D	isbursem			
Mailing Address 1350 DORSEY ROAD B	JILDING A STE A		0 7 M	19	) / Y	ž 0 Ď 6	Y
HÁNOVER	State Zip Code MD 21076		Amount o	of Each D	isburseme	ent this P	-
Purpose of Disbursement						2000.0	O .
Candidate Name		Category/ Type					
Office Sought:    House   Disburse     X Senate     President     State: MD District: 03	ment For: 2006 Primary X General Other (specify) ▼						
Full Name (Last, First, Middle Initial)  SUE MYRICK FOR CONGRESS			Transact Date of D	isbursem		9	
Mailing Address P.O. Box 37091			0 <sup>M</sup> 7 M	19	) / Y	ž 0 ŏ 6	Y
City Charlotte	State Zip Code NC 28237		Amount o	of Each D	isburseme		-
Purpose of Disbursement	Γ					2500.0	0
Candidate Name		Category/ Type					
Office Sought: X House Disburse Senate President State: NC District: 09	ment For: 2006 Primary X General Other (specify)						
SUBTOTAL of Disbursements This Page (optional)		▶				2000.0	0
TOTAL This Period (last page this line number only)							

SCILDOLL B (I LCI OIII 3X)	Use seperate schedule(s)	(check only			PAGI	= /2//	3
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 28a	23 28b	24 28c	25 29	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full) PlastyPAC	and address of any political co	minuted to 30	icit contribui		1 30011 0011	iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	
Full Name (Last, First, Middle Initial)  A. TALENT FOR SENATE COMMITTEE			Date of D	isbursem			V
Mailing Address 147 N MERAMEC SUITE	100		0 9	<sup>1</sup> 1 2		ž 0 Ď 6	
,	State Zip Code MO 63105		Amount o	f Each Di	isburseme		-
Purpose of Disbursement						5000.0	0
Candidate Name		Category/ Type					
Office Sought:    House   Disburse     X Senate     President     State: MO District: 00	ment For: 2006 Primary X General Other (specify) ▼						
Full Name (Last, First, Middle Initial)  3. TEXANS FOR HENRY BONILLA			Transact Date of D	isbursem	ent	2	
Mailing Address P.O. Box 17292			0 9	12	) / Y	ž 0 ŏ 6	Y
San Antonio	State Zip Code TX 78217		Amount o	of Each Di	isburseme	ent this P	-
Purpose of Disbursement						2500.0	U
Candidate Name		Category/ Type					
Senate President	ment For: 2006 Primary X General Other (specify)						
State: TX District: 23  Full Name (Last, First, Middle Initial)			Transact	ion ID: S	B23.479	7	
C. TIBERI FOR CONGRESS			Date of D	isbursem	ent		Υ
Mailing Address 2021 E Dublin Granville F Suite 2000			0 9	1 2		ž 0 ŏ 6	
	State Zip Code OH 43229		Amount o	f Each Di	isburseme		-
Purpose of Disbursement						2000.0	0
Candidate Name		Category/ Type					
Office Sought:    X   House   Disburse     Senate   President     State: OH   District: 12	ment For: 2006 Primary X General Other (specify)						
SUBTOTAL of Disbursements This Page (optional) .						9500.0	0
TOTAL This Period (last page this line number only)							

SCILDOLL B (I LCI OIII 3X)	Use seperate schedule(s)		-OR LIN (check o	IE NUME nlv one)	BEH:		LP	AGE	/3 / /	3
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	22 28a	X	23 28b	24 28c	<u>,</u> Н	25 29	2 3
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name										5
NAME OF COMMITTEE (In Full) PlastyPAC	e and address of any political	COMM	intee to s	SOIICIT COI	TUIDUI	10113 111	JIII SUCII	COMM	THILLGE	
Full Name (Last, First, Middle Initial)  TRENT LOTT FOR MISSISSIPPI  Mailing Address PO BOX 22824				Dat		isburse	SB23.4 ement		0 ŏ 6	Y
	Ctata Zin Cada			A			Dialarma		1 4la:a D	
City JACKSON	State Zip Code MS 39225			Am	ount c	of Each	Disburs			-
Purpose of Disbursement			·					2	2500.0	00
Candidate Name			egory/ ype							
Office Sought:    House   Disburs     X Senate   President     State: MS District: 00	ement For: 2006 Primary X General Other (specify)									
Full Name (Last, First, Middle Initial)  3- UPTON FOR ALL OF US						ion ID:	SB23.4	4537		
Mailing Address P.O. Box 490				0 <sup>M</sup>	7 <sup>M</sup>	/ D 1	9 /	Ý Ž	0 Ď 6	Y
City St. Joseph	State Zip Code MI 49085			Am	ount c	of Each	Disburs		t this P	-
Purpose of Disbursement									-000.0	
Candidate Name			egory/ ype							
Office Sought: X House Disburs Senate President State: MI District: 06	ement For: 2006 Primary X General Other (specify)									
Full Name (Last, First, Middle Initial)  VICTORY FUND '98 - JOINT FUNDRAISI	NG COMMITTEE					ion ID:	SB23.4	4511		
Mailing Address 911 20TH STREET				0	7 <sup>M</sup>	/ D 1	9 /	ž	0 0 6	Y
City SACRAMENTO	State Zip Code CA 95814			Am	ount c	of Each	Disburs			-
Purpose of Disbursement VoidMarch 15, 2006			·					-5	5000.0	00
Candidate Name			egory/ ype							
· —	ement For: 2006 Primary General Other (specify)									
SUBTOTAL of Disbursements This Page (optional)			. •					-	500.0	0
TOTAL This Period (last page this line number only			. •					104	500.0	0